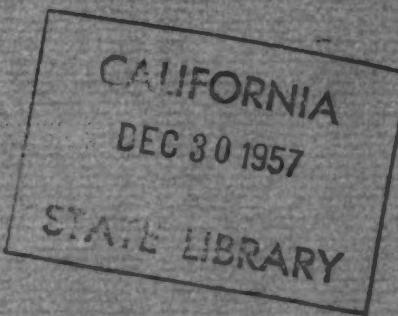


Rehabilitation Literature

December, 1957
Vol. XVIII, No. 12



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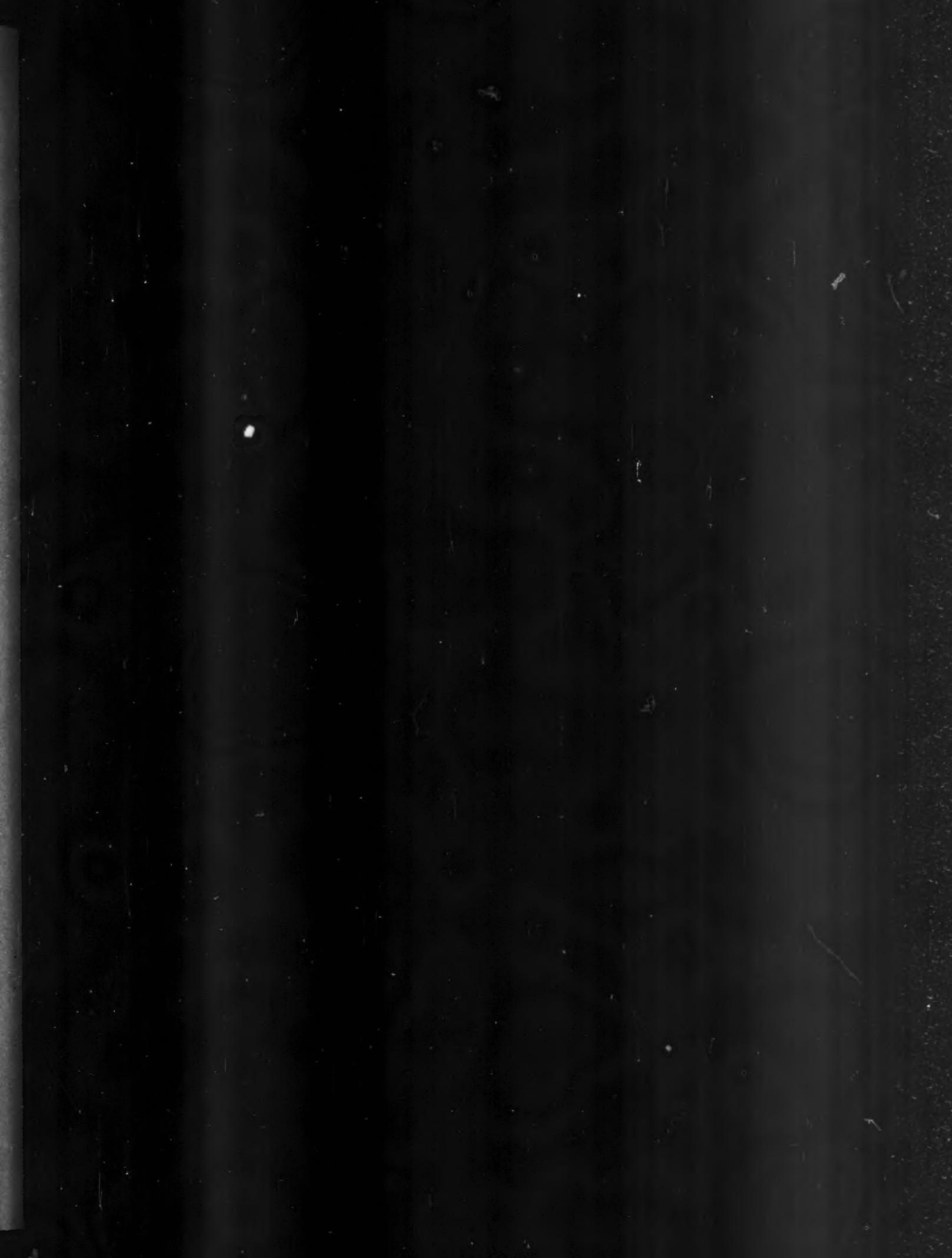
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REHABILITATION LITERATURE serves as a monthly supplement to the reference book *Rehabilitation Literature 1950-1955*, compiled by Graham and Mullen, published in 1956 by the Blakiston Division of McGraw-Hill, New York.

REHABILITATION LITERATURE is compiled for use primarily by physicians, occupational, physical and speech and hearing therapists, nurses, welfare workers and administrators, school administrators and teachers of exceptional children, psychologists, vocational counselors and employment personnel, and for students entering these professions.

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The monthly issues of this abstracting bulletin serve as a supplement to the reference book Rehabilitation Literature 1950-1955, compiled by Graham and Mullen and published in 1956 by McGraw-Hill, New York.

New Additions to the Library's Periodical Collection

Bulletin de la Federation Internationale des Mutiles et Invalides du Travail et des Invalides Civils, 11A, rue San Tommaso d' Aquino, Rome, Italy. Vol. 1, no. 1, March, 1957. Quarterly. Published in French. Apply.

Journal of Mental Deficiency Research. Publishing Manager, Mr. A. Highfield, 10, Shendon Way, Sevenoaks, Kent, England; Editor, Dr. B. W. Richards, St. Lawrence's Hospital, Caterham, Surrey, England. Vol. 1, no. 1, July, 1957. 15s a year; 7s 6d a copy (U.S., \$1.50 a copy).

Published with the financial support of the National Society for Mentally Handicapped Children, Kingsway Chambers, 162A The Strand, London, W.C. 2, England.

* * * * *

ACCIDENTS--PREVENTION

1362. Rice, R. Gerald (88 Broad St., Boston 10, Mass.)

Accidental injuries to children, by R. Gerald Rice, George W. Starbuck, and Robert B. Reed. N. Eng. J. Med. Dec. 27, 1956. 255:26:1212-1219. Reprint.

Describes a children's accident-prevention program instituted by the Massachusetts Dept. of Public Health with the aid of a grant from the Charles H. Hood Dairy Foundation in 1953. The program was carried out in one community, Greater New Bedford; statistics were reported on children 16 years or younger. Community activities and preventive measures employed are discussed. Factors responsible for success of the program are given as suggestions for other communities wishing to plan similar programs.

1363. Zarbock, Richard (1033 S. Bradford St., Dover, Del.)

Role of the physical therapist in home accident prevention, by Richard Zarbock and Mary Kenyon. Phy. Therapy Rev. Oct., 1957. 37:10:658-660.

Home accident prevention can be a vital part of home care programs initiated by health departments; the physical therapist's role is primarily to help train patients to attain maximum function within their limitations with due regard for the hazards of their environment. While accomplishing this, the therapist can orient parents on the existing hazards and means of correcting them. Teaching safety can be incorporated in the instructions on proper construction and use of equipment. Suggestions are given on aspects of safety to be considered in the construction and use of adaptive and therapeutic equipment for the handicapped.

ADOLESCENCE

1364. Call, Justin D. (Univ. of Calif. Med. Center, Los Angeles 24, Calif.)
Interrelationships between physical and psychological development of teen-age cerebral palsied. Cerebral Palsy Rev. July-Aug., 1957. 18:4:8-10.
A description of some of the psychological, social, educational, and vocational problems of the teen-aged and adult cerebral palsied. Many of these arise from unresolved problems of early childhood, parents' attitudes, and society's rejection of the handicapped. The qualities which society expects an adult to possess are defined and the question is raised as to how the cerebral palsied are being helped to achieve these qualifications. Two case histories are contrasted to illustrate the problems of adjustment facing the cerebral palsied.

See also 1464.

AMPUTATION--MICHIGAN

1365. House, Frederic B. (St. Joseph's Mercy Hosp., Ann Arbor, Mich.)
Function of an amputee clinic. J. Mich. State Med. Soc. Sept., 1957. 56:9(Section I):1159-1161.

Describes services and functions of a Lower Limb Amputee Clinic at St. Joseph's Mercy Hospital, Ann Arbor, for the rehabilitation of the individual amputee patient. After the case has been presented to the clinic by the surgeon, physical therapy may be prescribed, and the team evaluates the degree of rehabilitation to be expected, ways of accomplishing this objective, and means of financing rehabilitation costs. The prosthetist builds the prosthesis to the doctor's prescription; gait training is carried out under the physical therapist's direction, and vocational adjustment is the province of representatives of the Office of Vocational Rehabilitation. Members of the team are from agencies already existing in the community where hospital facilities are available. The team functions in such a manner that the patient-doctor relationships found in open staff community hospitals is not disturbed. Includes two brief case histories of amputees receiving services in the Clinic.

AMPUTATION--EQUIPMENT

1366. Hellebrandt, F. A. (153 Morris St., Athens, Ohio)
Cross education in the prosthetic training of the below-elbow amputee, by F. A. Hellebrandt, Sara Jane Houtz, and Miriam J. Partridge. Am. J. Phys. Med. Aug., 1957. 36:4:196-211.

A report of an experiment to determine the value of use of a prosthetic mock-up on the normal arm in the training of below-elbow amputees. The hypothesis was based on previous evidence demonstrating transfer of skill from the trained limb to the contralateral untrained extremity. The Minnesota Rate of Manipulation Test was used with a group of 22 normal adult subjects to determine the value of 10 days' training in use of the mock-up, which develops basic reaching, grasping, and release movements used by the amputee in daily living activity skills. Findings revealed the carry-over was so great as to suggest that pre-prosthetic training should materially shorten the training period once the patient has received his individually fitted artificial limb.

AMPUTATION--EQUIPMENT--RESEARCH

1367. California. University. Institute of Engineering Research

Studies of circulation and surface temperature of amputation stumps, by Ellen Brown. San Francisco, The University, 1957. 94 p. figs., tabs. (Lower-Extremity Amputee Research Project. Ser. 11, issue 32. June, 1957).

A report of studies of the circulation of blood in amputation stumps, undertaken as part of a broad investigation of pain in amputees. An evaluation was made of the circulatory status of the stumps of 44 amputees; clinical examinations, with tests for ischemia and vasomotor dysfunction regulation in these subjects, referred to the Prosthetic Devices Research Project at the University of California with the complaint of pain, were coordinated with laboratory investigations in a controlled environment. Methods and results of the studies are discussed and recommendations made for further research. Bibliography of 37 references.

This report represents another in the series of research projects carried out under the direction of the Prosthetics Research Board of the National Research Council. Report issued from Biomechanics Laboratory, 463 University of California Hospital Bldg., Univ. of California Medical Center, Third and Parnassus Aves., San Francisco 22, Calif.

APHASIA--PSYCHOLOGICAL TESTS

1368. Bressler, Mildred Bloom (7321 Beverly Blvd., Los Angeles 36, Calif.)

A study of an aspect of concept formation in brain-damaged adults with aphasia. Dissertation Abstracts. 1956. 16:568-569. Reprint.

An abstract of a study investigating the ability of 20 male brain-damaged patients with aphasia to solve an abstract problem involving the exercise of complex intellectual processes in concept formation. Variables of the Concept Formation Test were analyzed to evaluate the relationships among the brain-damaged group, a group of brain-damaged patients without aphasia, and a "normal" hospital group without brain damage or aphasia. The author concludes that there is no greater impairment in conceptual ability of the aphasics than of the non-aphasics when severity of brain damage is roughly equated. The "normal" group, as would be expected, did considerably better than the two brain-injured groups.

ARCHITECTURE (DOMESTIC)

1369. Nicholson, Edna E. (343 S. Dearborn St., Chicago 4, Ill.)

Housing as a basic need of senior citizens. J. Am. Med. Assn. Oct. 26, 1957. 165:8:1058-1062.

The tenth in a series of papers dealing with various aspects of aging. When the series is completed, the papers will be published together in booklet form. This particular paper deals with housing arrangements for older people still able to live independently, for those still ambulant and needing minimum care, and for those with chronic illness requiring constant nursing care. The author does not believe special facilities are needed for those still independent; they should be available, however, to persons unable to maintain their own homes. Facilities should be as homelike as possible and planned to care for both the ambulant and chronically ill, providing security for the remainder of the older person's life.

ARTHRITIS--MEDICAL TREATMENT

1370. Tuttle, Esther (1111 Park Ave., New York 28, N. Y.)

The treatment of osteoarthritis; general and specific. N. Y. State J. Med. Mar., 1, 1957. 57:5:913-918.. Reprint..

Treatment of osteoarthritis demands a separate plan for each individual, with emphasis on the part played by correct nutrition, sufficient rest, emotional stability, and endocrine balance. Diet requirements and those for minerals, vitamins, hormones, and analgesics are outlined; physical therapy treatments for osteoarthritis and the most commonly affected sites are described.

See also 1475.

ARTHRITIS--SURVEYS

See 1384.

ASTHMA--BIOGRAPHY

See 1438.

BLIND--PROGRAMS

See 1463.

BLIND--PROGRAMS--NEW YORK

1371. Platt, Philip S. (N. Y. Assn. for the Blind, 111 E. 59th St., New York 22, N. Y.)

Ten years of cooperative rehabilitation activities; operations and results. New Outlook for the Blind. Oct., 1957. 51:8:357-363.

An analysis of results of cooperation between the Vocational Rehabilitation Services of the New York State Commission for the Blind and the Lighthouse for the Blind, New York City. A follow-up of 501 blind trainees who completed training at the Lighthouse provided information on sex, age, marital status, educational background, vision classification, age at onset of blindness, type of training, first employment after training, present employment, salary range, and duration of Vocational Rehabilitation Service sponsorship.

BLIND--SPECIAL EDUCATION

See 1426; 1427.

BRACES

See 1462.

BRAIN INJURIES--DIAGNOSIS

1372. Graham, Frances K. (Washington Univ. School of Med., 4580 Scott Ave., St. Louis 10, Mo.)

Behavioral differences between normal and traumatized newborns: I. The test procedures, by Frances K. Graham. II. Standardization, reliability, and validity, by Frances K. Graham, Ruth G. Matarazzo, and Bettye M. Caldwell. Psychological Monographs. 1956. 70:20 & 21:1-33.

BRAIN INJURIES--DIAGNOSIS (continued)

Psychological Monographs, 1956, Nos. 427 and 428.

A report of research undertaken as part of a long-term project on the effects of anoxia, with the author, Dr. Alexis F. Hartmann, and Dr. Miriam M. Pennoyer as principal investigators under a research grant from the National Institute of Neurological Diseases and Blindness. This research was originally supported by two local foundations. The two papers combined in the monograph describe five measures of response or behavior of normal and brain-injured infants. Five procedures were eventually developed--measures of pain threshold, maturation level, visual response, and ratings of irritability and muscle tension. Methods of administering the test procedures are described in Part I and the effectiveness of procedures in Part II. The question of whether behavior of the newborn can predict either past or future development of the infant is considered, as was the possible relationship between present findings and neuro-physiological knowledge of the functioning of the newborn brain.

Available from American Psychological Assn., 1333 Sixteenth St., N.W., Washington 6, D.C., at \$1.50 a copy.

BRAIN INJURIES--ETIOLOGY

1373. Bourne, J. G. (St. Thomas's Hosp., London, Eng.)

Fainting and cerebral damage; a danger in patients kept upright during dental gas anaesthesia and after surgical operations. Lancet. Sept. 14, 1957. 273:6994:499-505.

In same issue: Cerebral damage from shock due to disease in aged people; with special reference to cardiac infarction, pneumonia, and severe diarrhoea, P.D. Bedford, p. 505-509. -Anoxia and cerebral damage (an editorial), p. 529-530.

A report of observations begun in 1955 on the potential dangers of keeping the patient upright during a fainting attack following administration of dental gas and similar danger when a patient is kept propped up in bed following operation. Unless the patient is lowered to the horizontal position, he may die or his brain may be permanently damaged. Case histories and a discussion of findings of observations on circulatory changes under dental gas are included.

The second article reviews 14 cases of extreme dementia following "shock-states" in elderly persons. Seven of the cases exhibited dementia following acute myocardial infarction; 5, following acute pneumonia, and 2, following severe diarrhoea. General precautionary and therapeutic measures are suggested and factors contributing to the condition are discussed.

The editorial discusses the two articles described above and reviews the literature on cerebral anoxia or hypoxia and its consequences. Though the disaster is not common, it is not wholly confined to elderly persons.

CANCER--MENTAL HYGIENE

1374. Sutherland, Arthur M. (444 E. 68th St., New York 21, N.Y.)

The psychological impact of postoperative cancer. Bul., N.Y. Acad. Med. June, 1957. 33:6:428-445. Reprint.

Cancer poses a threat to important patterns of adaptation which the patient has evolved, thus generating anxiety to which each patient reacts according to his individual pattern of adaptation to stress. Six clinical types of reactions commonly seen following surgery or other forms of therapy are described. Family relationships prior to surgery and cultural background of the patient can be the cause of psychological barriers to rehabilitation of the cancer patient. It is the physician's responsibility to devise means of assisting the patient in achieving meaningful adaptations and goals to suit his needs.

CEREBRAL PALSY

See 1425.

CEREBRAL PALSY--NORWAY

1375. Morley, D. E. (210 Buena Vista, Ann Arbor, Mich.)

The treatment of cerebral palsy in Norway. Phys. Therapy Rev. Oct., 1957. 37:10:664-666..

With the opening in 1949 of a new children's clinic at the University of Oslo Hospital, parents of cerebral palsied children requested that short-term inpatient treatment be arranged for their handicapped children. This parent group later formed the Norwegian Cerebral Palsy Association. Through their efforts and those of other voluntary organizations, plus governmental aid, treatment facilities in Norway have expanded and trained personnel has been recruited for the program. Educational facilities still need trained teachers, however, and psychological evaluation services are still inadequate. The author, associate professor in the Speech Department of the University of Michigan and Senior Speech Therapist at the University Speech Clinic, was a Fulbright Lecturer in speech pathology in Norway during 1956-57.

CEREBRAL PALSY--DIAGNOSIS

See 1393.

CEREBRAL PALSY--MEDICAL TREATMENT

1376. Keats, Sidney (31 Lincoln Park, Newark 2, N.J.)

Combined adductor-gracilis tenotomy and selective obturator-nerve resection for the correction of adduction deformity of the hip in children with cerebral palsy. J. Bone and Joint Surg. Oct., 1957. 39-A:5:1087-1090.

Describes a combined operation for the correction of adduction deformity of the hip in cerebral palsied children, developed at the Cerebral Palsy Clinic and Treatment Center, New Jersey Orthopedic Hospital, Orange, N.J. The procedure, recommended only for the spastic group of cerebral palsied children, has been completed on 38 patients during the past 8 years and improvement has been noted in 35 of this series. The operation should be preceded by careful analysis of the muscle potentialities about the hip joint and should be followed, the author stresses, by early vigorous exercises for the activation and strengthening of the hip abductors. In the author's opinion, the combined operation not only helps reduce the adduction deformity but removes an "insidious source" of knee-flexion deformity.

CEREBRAL PALSY--MEDICAL TREATMENT (continued)

1377. Watkins, Margaret (3503 Fairmont St., Dallas 19, Texas)

Clinical evaluation of zoxazolamine (Flexin) in children with cerebral palsy, by Margaret Watkins and Martha H. Hale. J. Am. Med. Assn. Oct. 19, 1957. 165:7:830-833.

A report of an experimental testing of Flexin (zoxazolamine) for its effect on the stretch reflex in children with cerebral palsy, both of the spastic and athetoid type. Evaluation was also made of their ability to perform an already learned task in a given length of time. Muscles of speech articulation were tested, as well. Data cover drug dosage; results were checked against parents' subjective reports on noticeable improvement. In the authors' opinion the only real variable in the results is apparently psychological.

See also 1434.

CEREBRAL PALSY--MENTAL HYGIENE

See 1364; 1398.

CEREBRAL PALSY--PROGRAMS

1378. Wallace, Helen M. (School of Public Health, Univ. of Minn., Minneapolis 14, Minn.)

Children with cerebral palsy; cost of care and results in 770 children, by Helen M. Wallace (and others). Pediatrics. Oct., 1957. 20:4:703-715.

A report of findings and interim results of a follow-up study of 770 children with cerebral palsy, cared for under the New York City Financial Aid Program. All were treated as in-patients. The study was undertaken to determine severity of involvement, cost of care under the program, amount of significant improvement due to care, and number of potential candidates for custodial care. The authors conclude that findings indicate the need for some redirection of the program to include development, expansion and improvement of some alternate services within the community. The appendix includes an outline of measurements used in assembling data on children at various age levels.

CEREBRAL PALSY--RECREATION

See 1467.

CEREBRAL PALSY--SPEECH CORRECTION

1379. Irwin, Orvis C. (Iowa Child Welfare Research Center, Iowa City, Iowa)

A third set of consonant substitution and omission errors in the speech of cerebral palsy children. Cerebral Palsy Rev. July-Aug., 1957. 18:4:11.

In same issue: A second short test for use with children who have cerebral palsy, by Orvis C. Irwin. p. 18-19.

The third in a series of articles by the author on the presence of substitutions and omission errors in the speech of cerebral palsied children (see Rehabilitation Literature, Oct., 1956, #1192). This study serves as another check on findings of the first two articles. A list of 17 words, used to test correct articulation, substitutions and omissions, and a summary table of an analysis of variance on these consonants are included. As in the

CEREBRAL PALSY--SPEECH CORRECTION (continued)

previous studies, omissions significantly exceeded substitutions, demonstrating that children with cerebral palsy are unlike normal children in this respect.

The second article describes another short test, based on 6 consonants, which meets adequately the 4 criteria of a satisfactory testing instrument. The word list and an alternate list are appended. A similar short test based on five consonants was described in an article appearing in the Journal of Speech and Hearing (see Rehabilitation Literature, Mar., 1957, #310).

1380. Mecham, Merlin J. (Brigham Young Univ., Provo, Utah)

A scale for screening level of verbal communication behavior in cerebral palsy. Cerebral Palsy Rev. July-Aug., 1957. 18:4:22-23.

A scale developed for appraising the level of language readiness in 5 major communicative areas--listening, speaking, reading, writing, and general verbal communication--in cerebral palsied children. Standardized language items from Doll's Vineland Social Maturity Scale, Gesell's Developmental Schedules, Terman and Merrill's revision of the Binet Scale, Pool's Maturation Scale of Articulation, and the works of McCarthy were chosen to test the child directly. Parent or teacher interviews were used to verify the examiner's observations. Items have been standardized in respect to approximate age level of performance, but the scale is currently being tested to determine its validity and reliability as a whole. In its present form, however, the scale is useful as a screening device for general guidance. While the scale is included here, item definitions and specifications are not discussed. These may be obtained upon request from the author.

CEREBRAL PALSY--SPEECH CORRECTION--BIBLIOGRAPHY

1381. Mecham, Merlin J. (Brigham Young Univ., Provo, Utah)

A selected bibliography on cerebral palsy: Communication. Cerebral Palsy Rev. July-Aug., 1957. 18:4:13-17.

The result of a survey of published articles in the field of cerebral palsy communication, this bibliography, while not exhaustive, should serve as a comprehensive reference guide to teachers and therapists working with cerebral palsied children. Entries are classified according to subject under such headings as: speech problems, hearing problems, breathing problems; speech habilitation, reading and writing, and congenital aphasia. Foreign language and unpublished materials are not included.

CHILD GUIDANCE--INSTITUTIONS

1382. Benoit, E. Paul (Governor Bacon Health Center, Delaware City, Del.)

A new child study laboratory. Del. State Med. J. Aug., 1957. 29:8:207- Reprint.

Describes a new facility in the Governor Bacon Health Center for research on behavioral characteristics of maladjusted children. An additional major aim of the research is the probing of neurophysiological correlates of emotional behavior. Equipment of the laboratory is described in detail. The research possibilities of such a project are many.

CHILDREN (DEPENDENT)

1383. Colville, Anita (State Charities Aid Assn., 105 E. 22nd St., New York 10, N. Y.)
Adoption for the handicapped child. Child Welfare. Oct., 1957. 36:8:10-12.
In same issue: Discussion (of above article), by E. Elizabeth Glover, p. 12-14.

Discusses the child welfare agency's role in the selection of adoptive parents who will find satisfaction in caring for the handicapped. As used here, the term "handicapped" includes the physically handicapped, the emotionally disturbed, and the older child. Ways in which the agency can help both the adoptive parents and the child are considered. Early adoption of the handicapped child is stressed to avoid emotional difficulties in older children which only add to problems of adjustment in the physically handicapped child. The discussion by Miss Glover, Executive Director of the Maryland Children's Aid Society, is concerned with the recruitment of families for children with special needs and with some legislative measures which hamper the placement of children in adoptive homes.

CHRONIC DISEASE--SURVEYS

1384. Cobb, Sidney (Grad. School of Public Health, Univ. of Pittsburgh, Pittsburgh 13, Pa.)

Differences between respondents and nonrespondents in a morbidity survey involving clinical examination, by Sidney Cobb, Stanley King and Edith Chen. J. Chronic Diseases. Aug., 1957. 6:2:95-108. Reprint.

Gives a detailed report on differences found between those willing and unwilling to participate in health survey procedures when invited to accept a medical examination at a research clinic in a study of arthritis. Factors influencing participants and nonparticipants in their attitudes toward making use of medical care facilities are discussed. Persons living in a household of 8 persons or more and older persons were the two groups exhibiting low participation rates. Findings have implications for the planning of future studies of the prevalence of chronic disease. Recommendations are made for methods to be employed in future studies.

CLEFT PALATE

1385. MacCollum, Donald W. (300 Longwood Ave., Boston 15, Mass.)

Management of the patient with cleft lip and cleft palate, by Donald W. MacCollum and Sylvia Onesti Richardson. Pediatrics. Oct., 1957. 20:4: 573-583.

A review and clinical appraisal of results obtained over a 15-year period in the cleft palate program at Children's Medical Center, Boston. Discussed are: time and method of repair, supportive care (feeding and sleeping habits of the infant) before, during, and following surgery, and adjunctive care (speech training and dental care). Advisability of tonsillectomy and adenoidectomy in these children is considered pro and con. Conclusion drawn from an evaluation of long-range results of the program is that early palatal closure has been so satisfactory, continuation of the policy seems warranted.

CLEFT PALATE--SPEECH CORRECTION

1386. Wells, Charlotte G.

Speech training for cleft palate children; a teacher-parent guide, by Charlotte G. Wells and Gretchen M. Phair. Madison, Wis., Bureau for Handicapped Children, 1957. 51 p. illus.

Gives general information on the functions of speech organs which are incomplete because of cleft palate or cleft lip, suggests ways in which the teacher and parents may aid the child's growth and development and help to overcome the handicap, and outlines procedures for speech training at home and at school. The booklet contains drill material.

Available from Wisconsin State Dept. of Public Instruction, Bureau for Handicapped Children, State Capitol, Madison, Wis.

CONGENITAL DEFECT

See 1399; 1461.

CONGENITAL DEFECT--ETIOLOGY

1387. Penrose, L. S. (Galton Laboratory, University College, London, Eng.)

Genetics of anencephaly. J. Mental Deficiency Research. July, 1957. 1:Part I:4-15.

A discussion of some of the facts and possible theories regarding the etiology of anencephaly. Marked geographical differences in frequency are evident; for instance, incidence in some parts of the British Isles is 50 times that found in some parts of France. This geographical distribution must be recognized in discussing possible causes, whether environmental or genetic. Recessive inheritance probably accounts for some cases while chromosome translocation may cause others. Other genetic factors as possible causes are considered.

DAY CAMPING

1388. Zinn, Elizabeth (El Paso Council, Girl Scouts, El Paso, Tex.)

Seniors staff a day camp. Girl Scout Leader. Nov., 1957. 34:8:36-37.

Senior Girl Scouts of El Paso serve voluntarily at a day camp for handicapped children, held at Girl Scout Camp Pioneer and sponsored by El Paso's Community Service Council. Scouts receive pre-camp orientation in occupational therapy and in differences to be expected in children with various types of handicaps. The entire community cooperates to make the day camping experience a success.

DEAF--EMPLOYMENT

1389. Stunkel, Eva R.

Federal Civil Service and employment of the deaf. Silent Worker. Sept., 1957. 9:13:3-6.

Outlines policies of the Federal government in regard to employment of the physically handicapped, how such standards are set up, and steps taken by the Test Development and Occupational Research Section of the Civil Service Commission to improve methods for examining deaf applicants.

DEAF--SPECIAL EDUCATION

1390. Doctor, Powrie V. (Gallaudet College, Washington, D.C.)

Research needs in the educational field of deafness. Exceptional Children. Oct., 1957. 24:2:53-55.

Statistics in the January issue of American Annals of the Deaf were studied to discover: current status of trained teachers, pupil enrollment in all types of schools for the deaf, methods of instruction, use of hearing aids, preschool instruction, and provisions for the multiply handicapped. Implications of current trends for needed research in the field of special education for the deaf are discussed. Listed also are current research projects being carried on in speech and hearing clinics, state departments of education, and at Gallaudet College.

1391. Groht, Mildred A. (Lexington School for the Deaf, 904 Lexington Ave., New York, N.Y.)

The language arts in a school for the deaf. Volta Rev. Oct., 1957. 59:8:337-342.

The Principal of Lexington School for the Deaf discusses problems of teaching speech, lipreading, reading, and writing to deaf children. Emphasis in this article is on use of language in the nursery, preschool, and first grade since the foundations for language usage are laid here for work in succeeding grades. Formal teaching of grammar is not necessary in elementary grades of the school for the deaf.

DEGLUTITION

1392. Atkinson, Michael (Dr. Kramer, 65 E. Newton St., Boston 16, Mass.)

The dynamics of swallowing: I. Normal pharyngeal mechanisms, by Michael Atkinson (and others); II. Neuromuscular dysphagia of pharynx, by Philip Kramer (and others). J. Clin. Investigation. Apr., 1957. 36:4:581-595. Reprint.

A report of clinical investigations of the mechanism of swallowing and the nature and magnitude of the forces involved, using a method by which intraluminal pressures were recorded simultaneously from three levels in the pharynx and esophagus. Rapid serial radiographs were taken at the same time to enable interpretation of pressure records in terms of anatomical function and movement of the bolus. Part II reports investigation of disorders of the swallowing mechanisms in patients with various neuromuscular dysphagias, applying the same techniques as described in Part I. Disorders of swallowing in 4 patients with post-polio-myelitis dysphagia, in 2 with myasthenia gravis and one with dystrophia myotonia are discussed. Particular attention was given the question of whether functional disturbance of the cricopharyngeus hinders passage of the bolus.

DENTAL SERVICE

See 1373.

DRUG THERAPY

See 1377; 1419; 1420; 1423; 1434.

EDUCATION

See 1484.

ELECTROENCEPHALOGRAPHY

1393. Winfield, Don L. (Le Bonheur Children's Hosp., 848 Adams Ave., Memphis, Tenn.)

A review of EEG findings in the cerebral palsied. Cerebral Palsy Rev. July-Aug., 1957. 18:4:6-7, 19.

A review of the literature in regard to use of electroencephalography in the diagnosis of cerebral palsy. A comparison of results of the major investigations is included. The value of EEG findings as a guide in medical therapy, in determining prognosis, and in preventive medicine is discussed.

EMPLOYMENT--BIBLIOGRAPHY

1394. U. S. President's Committee on Employment of the Physically Handicapped
Employment of the physically handicapped; a bibliography, compiled by
Joan A. Donnelly... Library of Congress. Washington, D.C. Gov't Print.
Off., 1957. 93 p.

A revision of an earlier bibliography titled "Employing the Physically Handicapped," by Helen M. Steele and Lola A. Wyckoff Stephens, published in 1953. The present bibliography covers publications from 1950 to date, offering information on varied aspects of the employment problems of the handicapped, classified under the headings of: general discussion, legislation, Congressional hearings and reports, discussions on legislation, public assistance, workmen's compensation, rehabilitation, statistics, rehabilitation centers (including sheltered workshops and homebound programs), counseling and selective placement, nongovernmental and governmental employment, specific disabilities, biographies (recent and non-fiction), bibliographies and directories. Also includes a list of organizations and agencies (with addresses), a bibliography of films, and an author index.

Available from U.S. Superintendent of Documents, Washington 25, D.C., at 35¢ a copy.

EMPLOYMENT (GOVERNMENT)

See 1389.

EMPLOYMENT (INDUSTRIAL)--PLACEMENT

1395. Cantoni, Louis J. (Wayne State Univ., Detroit, Mich.)

Placing the handicapped in competitive employment. Voc. Guidance Quart. Autumn, 1957. 6:1:29-30.

A summarization of the guidelines drawn up by participants at the second annual Workshop on Rehabilitating the Handicapped held at Wayne State University, in November, 1956. (For complete proceedings see Rehabilitation Literature, Aug., 1957. #959). Twenty-two suggestions for implementing the placement of the handicapped in competitive employment are included here.

EXERCISE

1396. Peszczynski, Mieczyslaw (Highland View Cuyahoga Co. Hosp., Harvard Rd., Cleveland 22, Ohio)

Use and abuse in physical medicine and rehabilitation. Postgrad. Med. June, 1957. 21:6:626-630. Reprint.

A review of some recent research in the physiology of rest and convalescence, with a presentation of certain problems illustrating use and abuse of rest in tuberculosis, cardiac conditions, poliomyelitis, hemiplegia, fractures, rheumatoid arthritis and osteoarthritis. Principles to be observed in prescribing rest as treatment are summarized. The author stresses that these principles are generalizations rather than specific recommendations; each case should be evaluated on its individual merits.

FOOT

1397. Miller, Walter R. (Capt. Miller, U.S. Naval Hosp., San Diego Calif.)

Observations on the examination of children's feet. J. Pediatrics.

Nov., 1957. 51:5:527-536.

A discussion of some of the most common foot conditions in children brought to the attention of the doctor, including flat feet, internal or external rotation of one or both feet, metatarsus varus, and clubfoot. Their treatment and the types of conservative correction possible are considered. Dr. Miller stresses that careful examination of children's feet and adequate instruction of the parents are desirable.

GIRL SCOUTS

See 1388.

GUIDANCE

1398. Tracht, Vernon S. (5640 Kimbark Ave., Chicago 37, Ill.)

Development of emotional and social maturity through counseling and therapy. Cerebral Palsy Rev. July-Aug., 1957. 18:4:12-13. Reprint.

The aim of counseling with the cerebral palsied is to help them attain independence, a maximum degree of self-reliance, and self-determination within the limits of their handicap. Often negative attitudes of the handicapped can be a greater deterrent to their adjustment to society than the physical handicap. Society must provide adequate resources for meeting the needs of this group. Suggestions are given for the counseling of cerebral palsied persons.

HAND

1399. Kelikian, H. (30 N. Michigan Ave., Chicago 2, Ill.)

Congenital anomalies of the hand; Part I, by H. Kilikian and Ara Doumanian. J. Bone and Joint Surg. Oct., 1957. 39-A:5:1002-1019.

A discussion of the extremely varied types of malformations of the hand in newborn infants, which call for surgical intervention to enhance utility of the affected limb. Surgery is only justified, however, the authors believe, when it will increase function; while cosmetic appearance is important, a malformed hand that is useful is preferable to one less unsightly but not useful. Contraindications for, and timing of, surgery are considered, with surgical procedures described. Generalized congenital affections such as arthrogryposis with local manifestations and central-nervous-system lesions causing secondary crippling of the hand are not included in the paper.

HAND (continued)

1400. Zancolli, Eduardo A. (Ancon 5148-20E, Buenos Aires, Argentina) Claw-hand caused by paralysis of the intrinsic muscles; a simple surgical procedure for its correction. J. Bone and Joint Surg. Oct., 1957. 39-A:5:1076-1080.

Describes a method for correction of claw-hand caused by paralysis of the intrinsic muscles; slight flexion of the metacarpophalangeal joints is obtained by shortening the volar tissues of the joints. Techniques of the capsuloplasty are described briefly. Excellent results of its use in 7 patients are reported, the best being obtained in patients whose joints had not yet become stiff. The procedure can be completed with a tendon transplantation to obtain abduction of the index finger when necessary. Several indications for this type of surgery are mentioned.

HANDICAPPED--BIOGRAPHY

1401. Waggoner, Neva R.

Living is your responsibility. Crippled Child. Oct., 1957. 35:3:12-14, 21.

The author, Research Coordinator, School of Home Economics, University of Connecticut, was left handicapped from an attack of polio-myelitis at the age of three. Married and the mother of two children, she speaks from experience on ways of adjusting to the psychological impact and limited ability of a physical handicap. This article, taken from the workshop proceedings on "The Team Approach to the Rehabilitation of the Handicapped Homemaker," a project sponsored by the School of Home Economics at the University of Connecticut and the Office of Vocational Rehabilitation, illustrates how the disabled homemaker can overcome her limitations and lead a happy, useful life.

HANDICAPPED--FICTION

See 1485.

HARD OF HEARING--MEDICAL TREATMENT

1402. Scheer, Alan Austin (522 West End Ave., New York, N. Y.)

Rehabilitation of the hard of hearing. Eye, Ear, Nose & Throat Month. Oct., 1957. 36:10:593-600. Reprint.

Discusses the basic physiology of hearing, types of hearing loss, and especially, the rehabilitation of persons with conductive hearing loss. The fenestration procedure is mentioned briefly and a detailed description of the new technique called mobilization of the stapes is included, with complications and results obtained. The added value of the procedures lies in the restoration of the patient's self-confidence and social ease, with the relief of anxiety and tensions which accompany hearing loss.

HARD OF HEARING--SPECIAL EDUCATION

1403. Miller, June (Univ. of Kansas Med. Center, Kansas City, Kan.)

Classroom methods and materials for hard of hearing children. Volta Rev. Oct., 1957. 59:8:343-345.

HARD OF HEARING--SPECIAL EDUCATION (continued)

Emphasizes the necessity for complete evaluation--physical, social, and mental--before planning an educational program for the individual hard-of-hearing child. Sources of materials to be used in classroom instruction with these children are suggested. Audio-visual aids are chosen for their usefulness in the individual case and for their aid in achieving the educational goals set for the hard of hearing.

HARD OF HEARING--SPECIAL EDUCATION--INDIANA

1404. Summers, Raymond (Ind. State Board of Health, 1330 W. Michigan Ave., Indianapolis, Ind.)

The hearing handicapped child. Bul., Ind. State Board of Health. Oct., 1957. 59:10:11-13.

Gives an estimate of the number of hearing-impaired children in Indiana in elementary and secondary schools and describes an oral day school program established by legislation in 1955 and administered by the Hearing Commission. This is, however, only one of four public school programs in the state providing instruction for the hearing handicapped. The oral day school is mainly for preschool children; its objective is to prepare children for entry into regular classrooms at the first grade level.

HARD OF HEARING--SPECIAL EDUCATION--NEW YORK

1405. New York. State Education Department

Are you using special educational services for the child with a hearing loss? Speech reading, speech correction, auditory training, use of the hearing aid. Albany, The Department, 1957. 10 p.

One of several booklets published by the State Education Department's Bureau for Handicapped Children to acquaint teachers with the needs of exceptional children for additional assistance, in this instance, children with loss of hearing. Brief explanations are offered here on terms used in discussing basic communication skills, the value of speech reading, speech correction, hearing aids, and auditory training, and sources of information and assistance available in the state.

Available from Anthony J. Pelone, Bureau for Handicapped Children, State Education Dept., Univ. of the State of New York, Albany 1, N.Y.

HEART DISEASE--EMPLOYMENT

1406. Lee, Phillip R. (Palo Alto Med. Clinic, 300 Homer Ave., Palo Alto, Calif.)

Cardiac rehabilitation; questionnaire survey of medical directors in industry, by Phillip R. Lee (and others). J. Am. Med. Assn. Oct. 19, 1957. 165:7:787-791.

In same issue: Cardiac rehabilitation; questionnaire survey of general practitioners, by Bryan Williams (and others). p. 791-794.

Dr. Lee, Dr. Howard A. Rusk, Dr. Paul D. White, and Dr. Bryan Williams collaborated in these two surveys of cardiac rehabilitation. In the first article data from 19 medical directors of diversified industries operating plants in widely scattered areas of the United States were collected. Information was obtained on general characteristics of industries

HEART DISEASE--EMPLOYMENT (continued)

surveyed, employment policies in regard to cardiacs, actual number of known cardiacs hired, magnitude of the problem as reflected in personnel problems, and experience with workmen's compensation cases among cardiacs. Suggestions are offered on solutions to rehabilitation problems of cardiac patients in industry.

The second article reflects the opinions of 40 members of the American Academy of General Practitioners and what they consider the most important steps in the rehabilitation of cardiac patients. A survey of cardiologists' opinions is to be published later.

HEART DISEASE--MENTAL HYGIENE

1407. Beach, William B., Jr. (Langley Porter Clinic, Parnassus & First Ave., San Francisco 22, Calif.)

Emotional reactions to cardiac illness. Med. Times. Oct., 1957. 85:10:1100-1106.

Emotions aroused in the patient by a cardiac condition and how the physician can recognize and deal with them are discussed. Anxiety reactions in both children and adult cardiac patients and the use of illness to gain emotional satisfactions are the most frequently encountered. Family attitudes also often require the physician's attention since they can hinder the patient's adjustment to his condition. While there are times when services of the psychiatrist are necessary to cope with the patient's emotional problems, this article shows the general practitioner what he can do to aid in the solution of psychological problems brought on by heart conditions.

HEART DISEASE (CONGENITAL)

1408. Johnson, John B. (Dept. of Medicine, Howard Univ., Washington, D.C.)

Congenital cardiovascular anomalies in adults, by John B. Johnson, John W. Lawlah, and Leslie E. Hedgepath. J. Am. Med. Assn. Oct. 26, 1957. 165:8:915-922.

It is beginning to be recognized that congenital heart disease may be much more important in the etiology of heart disease in adults than was formerly realized; in the past 5 years 29 such cases have been detected in a small adult cardiac clinic. Cardiac anomalies represented are now, in most instances, curable by cardiovascular surgery. The radiologist should be alert to recognize possible congenital cardiovascular lesions on the basis of configuration of the heart and the great vessels, as seen in routine postero-anterior chest roentgenograms. Left-to-right shunt anomalies were seen most frequently; 8 of the lesions in this group were interatrial septal defects, all in women.

HEART DISEASE (CONGENITAL)--DIAGNOSIS

1409. Wedum, Bernice G. (1801 K St., N.W., Washington 6, D.C.)

Differential diagnosis of congenital heart disease in infancy. J. Am. Med. Assn. Oct. 12, 1957. 165:6:651-657.

A discussion of the relative value of various data obtained from the physical examination, history, electrocardiography, fluoroscopy, and roentgenography in diagnosing congenital heart disease. Study of the thoracic viscera

HEART DISEASE (CONGENITAL)--DIAGNOSIS (continued)

of 279 autopsied children led to the formulation of 11 questions which the author believes should be answered in making the diagnosis. An accurate diagnosis is possible in many cases where analysis of all available data is made. In a high percentage of such diagnoses, surgery sometimes offers the only chance for survival; in some congenital malformations surgery is not only palliative but curative. Operations should be carried out only in centers where experienced personnel are available.

HEMIPLEGIA

See 1413; 1432.

HEMIPLEGIA--BIOGRAPHY

1410. Wallace, Paula

I had a stroke. Crippled Child. Oct., 1957. 35:3:4-5, 29.

The personal-experience account of a stroke, the physical sensations accompanying it, her care in the hospital, and her rehabilitation. Gadgets which she has found useful in daily living activities are mentioned. She has found new interest in an association of the handicapped and in the companionship of others with varied disabilities.

HEMIPLEGIA--MEDICAL TREATMENT

1411. Lowenthal, Milton (Flower and Fifth Ave. Hosp., 1 E. 105th St., New York 29, N. Y.)

Contractures of the knee in hemiplegia. N. Y. State J. Med. Apr. 15, 1957. 57:8:1380-1381. Reprint.

Flexion contracture of the knee, an uncommon but preventable complication of hemiplegia, is the cause of failure in rehabilitation of these patients. Characteristics of the syndrome and therapy used in management are discussed. In cases where contracture is already present, surgical correction should be considered where correction of the deformity would improve function.

HEMIPLEGIA--PHYSICAL THERAPY

See 1482.

HEMOPHILIA

1412. McElfresh, Arthur E. (2600 N. Lawrence St., Philadelphia 33, Pa.)

Hemophilia. J. Pediatrics. Oct., 1957. 51:4:474-482.

A review of the current concept of hemophilia, coagulation factors and their synonyms, and the deficiencies of factors involved in hemophilia. Tests used in diagnosis are described briefly, as well as the means of determining a differential diagnosis. Therapy consists of local applications, replacement of the specific absent factor by plasma infusion, and education of parents and the patient on the physical and emotional problems involved.

HIP

See 1376.

HOME ECONOMICS

1413. Cicensia, Erbert F. (N. Y. State Rehabilitation Hosp., West Haverstraw, N. Y.)

Child care testing in functional training, by Erbert F. Cicensia, George R. Stephenson, and Charlotte F. Springer. Arch. Phys. Med. and Rehab. Oct., 1957. 38:10:651-655. Reprint.

Describes a test by which disabled mothers with disabilities of upper, as well as lower, extremities can be evaluated as to skill and physical ability to perform duties involved in infant and child care. The test evaluates performance in the management of nursery equipment and personal care of the child. Results of testing can be used as a basis for a teaching program in child care which is tailored to the individual patient's needs.

1414. Emmett, Ruth (422 - 50th St., Brooklyn 20, N. Y.)

Adaptation of homemaking skills for the hemiplegic woman. Am. J. Occupational Ther. Sept.-Oct., 1957. 11:5:283-287, 290-291.

The former director of a home management clinic for disabled home-makers in the Dept. of Physical Medicine and Rehabilitation, Bellevue Hospital, New York City describes skills needed by the hemiplegic home-maker. Covers meal preparation, meal service, laundry and general house-work, home sewing, safety in the home, and the basic equipment necessary for such a retraining program.

See also 1401.

HOSPITALS--PHYSICAL THERAPY DEPARTMENT

1415. American Hospital Association (18 E. Division St., Chicago 10, Ill.)

Physical therapy; essentials of a hospital department. Chicago, The Assn., 1957. 42 p. illus., floor plans. \$1.00.

Both content and approach to the subject matter are different in this completely rewritten manual replacing one published in 1949 by the American Hospital Assn. which was titled "Essentials of a Hospital Department --Physical Therapy." Areas not covered in the earlier manual have been given particular attention, especially where they concern physical therapy in the general hospital. Subjects covered are: physical therapy in relation to patient care; personnel; administration and finance; equipment, supplies, and a suggested guide for selecting equipment; selected examples of space requirements for efficient use of equipment; suitable environment of the department; safety factors; physical therapy departments in specialized hospitals; record forms; and floorplans for the department.

INSURANCE (LIABILITY)

See 1444.

LARYNGECTOMY

1416. Leuders, Oscar W. (Aurex New York, 511 Fifth Ave., New York 17, N. Y.)

Evaluation of postlaryngectomy rehabilitation programs. A. M. A. Arch. Otolaryngology. June, 1957. 65:6:572-574. Reprint

LARYNGECTOMY (continued)

Points out limitations of clinical studies dealing with the psychological reactions of the patient to laryngectomy and those dealing with evaluation of progress made by laryngectomized patients in speech rehabilitation programs. Several examples in the literature are used as illustrations of patient reactions; the point is stressed that better means should be sought to make rehabilitation programs available to the laryngectomee. A team composed of the laryngologist, the speech pathologist or esophageal voice teacher, and the psychologist are best fitted to evaluate factors inherent in the noncooperating group of patients. The patient himself should not be left to make his own subjective evaluation of rehabilitation potentialities.

LATERALITY

See 1366.

MENTAL DEFECTIVES--ETIOLOGY

See 1387.

MENTAL DEFECTIVES--PROGRAMS

1417. Thomas, D. H. H. (Cell Barnes Hospital, St. Albans, England)

A survey of mental deficiency problems in the United States of America.
J. Mental Deficiency Research, July, 1957. 1:Part I:33-52.

At the invitation of the World Health Organization, the author accepted a short-term appointment as consultant in mental deficiency to the U. S. Public Health Service to lecture and advise in the United States. While here he had the opportunity of visiting training schools, university medical schools, mental hospitals, special schools for the mentally retarded, schools for the emotionally and socially maladjusted, and a penitentiary with a special unit for psychopathic delinquents. He comments here on incidence statistics, administration of mental deficiency services, certification, distribution of cases by clinical diagnosis, current legislation and practice in employing sterilization procedures in mental deficiency, and the impact of segregation (race) upon institutional administration. Types of mental deficiency research in progress in the United States are discussed briefly.

MENTAL DEFECTIVES--PSYCHOLOGICAL TESTS

1418. Claridge, G. S. (Institute of Psychiatry, Maudsley Hosp., London, England)

The relationship between incentive, personality type and improvement in performance of imbeciles, by G. S. Claridge and N. O'Connor. J. Mental Deficiency Research, July, 1957. 1:Part I:16-25.

Because earlier group learning experiments indicated no consistent association between tested intelligence and improvement in learning, the authors undertook this study to discover if there were meaningful relationships between personality differences and differences in learning ability on repetitive motor tasks in imbeciles. Subjects were divided into excitable and apathetic types and tested by means of a rating scale developed to cover related areas of behavior. Data gained from several experiments are considered under improvement under non-incentive conditions and under

MENTAL DEFECTIVES--PSYCHOLOGICAL TESTS (continued)

incentive conditions. The apathetic type (inert) appeared to improve much longer and "fall off" less quickly on repetitive tasks than the excitable type when given no external sources of motivation. Correlations with improvement under incentive conditions were low, but consistently positive on the Excitability Score, with a significant tendency for excitable imbeciles to decline more than inert imbeciles when incentive was removed. The Excitability Rating Scale is appended.

MENTAL DISEASE--EMPLOYMENT

See 1477.

MENTAL DISEASE--MEDICAL TREATMENT

1419. Scherer, Isidor W. (V.A. Hospital, Northampton, Mass.)

Effects of physiodynamic treatments in a hospital over a ten-year period, by Isidor W. Scherer and Arnold Trehub. Diseases Nerv. System. Feb., 1957. 18:2:55-58. Reprint.

A survey of results of treatment procedures at the Northampton, Mass., Veterans Administration Hospital from 1946 to 1956, describing the improvement status of 533 mental patients who had received electroconvulsive treatment, lobotomy, insulin, and drug therapy (chlorpromazine, reserpine). Results were compared with those in a control group which received none of the physiodynamic treatments. Findings revealed chlorpromazine was most effective, followed in order by reserpine, electroconvulsive therapy and lobotomy. Where age and diagnosis were controlled, drugs were found most effective in a chronic sample, although not significantly more so than electroconvulsive therapy. In an acute sample no one treatment appeared significantly superior.

MENTAL DISEASE--OCCUPATIONAL THERAPY

1420. Elkins, H. K. (V.A. Hospital, Palo Alto, Calif.)

Changes in occupational therapy due to the tranquilizing drugs, by H. K. Elkins and N. Meryl Van Vlack. Am. J. Occupational Ther. Sept.-Oct., 1957. 11:5:269-272.

In same issue: The effect of the professional activity of the occupational therapist on the behavior of acute mental patients, by G. Donald Niswander, George M. Haslerud, and Eileen Dixey. p. 273-275.

A report of changes observed in "tranquilized" neuropsychiatric patients in the occupational therapy clinics of the V.A. Hospital, Palo Alto, Calif. and how these changes have affected the role of occupational therapy. Most significant elements in improvement are diminished hyperactivity, assaultiveness, and destructive behavior; a raised level of comprehension and interest for objects and people in the environment; and an increased attention span and ability to plan for goals. How these elements affect the therapist's work is discussed in detail. The second article reports findings of a study of the role of the occupational therapist working with acute mental patients. Behavior of the therapist was observed to affect acute patients' sociability but not their activity on occupational therapy tasks.

Comparison of the reactions of chronic mental patients and acute mental patients to the active and passive roles of the therapist is made. It is suggested that volunteers or aides relieve the therapist of routine duties so that interpersonal relationships between patient and therapist could be utilized toward the patients' recovery.

MENTAL HYGIENE

See 1424.

MONGOLISM

1421. Mittwoch, Ursula (Galton Laboratory, University College, London, England) Some observations on the leucocytes in mongolism. J. Mental Deficiency Research. July, 1957. 1:Part I:26-32.

A report of a clinical investigation to discover more about the kind of variation to be expected in the lobe count of mongols and to compare this with similar counts obtained from non-mongol controls. Sex differences in blood cells and "drumsticks" in blood films from mongols were investigated. Total white cell counts and differential counts of mongols were compared with those of controls to determine if differences could be demonstrated between the two groups. Results of this latter comparison strongly suggest that leucocytosis is not a general condition in mongols and that the shift to the left cannot be due to that factor. There is evidence that differential counts are different in the two groups, the ratio of lymphocytes to neutrophils being lower in mongols than in controls.

MUSCLES

1422. Lowenthal, Milton (1 E. 105th St., New York 29, N.Y.) Contractures in chronic neurologic disease, by Milton Lowenthal and Jerome S. Tobis. Arch. Phys. Med. and Rehab. Oct., 1957. 38:10:640-645. Reprint.

A paper limited to discussion of the neurogenic type of contracture found in spasticity with muscle imbalance, paralysis of paresis with muscle imbalance, and neuritis with pain and increased muscle tone. Areas that require further research are suggested. The exact pathogenesis and pathology of contractures are yet to be determined. Simple techniques for the prevention of contractures in patients with acute and marked neurological disease can, the authors believe, virtually eliminate this complication in chronic disease.

MYASTHENIA GRAVIS

1423. Schwab, Robert S. (Dr. Osserman, 4 E. 89th St., New York 28, N.Y.) Treatment of myasthenia gravis; prolonged action with multiple-dose tablets of neostigmine bromide and Mestinon bromide, by Robert S. Schwab, Kermit E. Osserman, and J. Edward Tether. J. Am. Med. Assn. Oct. 12, 1957. 165:6:671-674.

MYASTHENIA GRAVIS (continued)

The disadvantage of using anticholinesterase drugs in the treatment of myasthenia gravis is the necessity for very frequent doses; often the patient's sleep at night is disturbed. Slow-release tablets have been developed in an attempt to overcome this drawback. The present study reports on the use of two different slow-acting tablets in two series of patients, numbering 85 and 109 respectively. Response to these dosage-forms varies in individual patients; the greatest benefit derived from their use was the elimination of the need to interrupt sleep frequently.

See also 1392.

NATIONAL HEALTH COUNCIL--PROCEEDINGS--1957

1424. National Health Council (1790 Broadway, New York 19, N.Y.)

Steps for today toward better mental health...report of the 1957 National Health Forum conducted by the...March 20, 21, 22, Cincinnati, Ohio, ed. by Josephine Nelson and Elizabeth M. Dach. New York, The Council, 1957. 118 p. \$1.50.

Subtitled "Pointers to action for all who give health services," this report includes addresses given at the Forum by eminent speakers and summaries of many panel discussions ranging from analyses of the impact of mental illness and the mental health movement upon our whole civilization to more specific topics such as in-service training programs. Addresses include: Putting available tools to work, Francis J. Braceland. -Mental health and American values, Harold D. Lasswell. -Mental health; a moving target, Margaret Mead. -Progress in state mental programs, G. Mennen Williams. -Medicine marshals its forces, David B. Allman. -The Joint Commission and the community self-survey, Jack R. Ewalt. Keynote speeches were delivered by Winfred Overholser, Basil O'Connor, and James E. Lash.

NERVE INJURIES

See 1486.

NEUROLOGY

1425. Bobath, Karel (Mrs. Bobath, Western Central Cerebral Palsy Centre, 23, Upper Wimpole St., London, W. 1, England)

Control of motor function in the treatment of cerebral palsy, by Karel Bobath and Berta Bobath. Physiotherapy. Oct., 1957. 43:10:295-303.

Reprinted from: Australian J. Physiotherapy. 1956. 2:75.

A description of treatment methods in cerebral palsy, based on the inhibition of abnormal reflex activity and the facilitation of normal automatic movement patterns, which have become known as the "Bobath Method." The theoretical background of the method is explained.

See also 1382; 1422; 1455; 1486; 1492.

NURSERY SCHOOLS

1426. Cutsforth, Margery

Blind youngsters in nursery schools and kindergartens: Part I, The preschool blind child at home, by Margery Cutsforth; Part II, Panel discussion: The blind child as a member of a nursery school or kindergarten. Exceptional Children. Oct., 1957. 24:2:58-66.

A panel discussion and address delivered at a one-day institute for nursery school and kindergarten teachers, organized by the Field Service for Blind Preschool Children of the California School for the Blind in conjunction with the Consulting Service of the National Association for Nursery School Education. Part I discusses parental attitudes toward blindness in the child, misconceptions about blindness, and how the real needs of the child can be met both by teachers and parents. In Part II, 5 teachers of preschool blind children discussed their reactions to the blind child in the classroom; experiences in helping normal persons adjust to the blind child without anxiety; normal children's reactions to the blind child in the group; and ways of adapting materials and activities for the blind child.

1427. New York. State Education Department

The blind child can attend kindergarten with sighted children. Albany, The Dept. (1957?). 9 p. Mimeo.

A number of suggestions concerning classroom management of the blind child in a regular kindergarten, prepared to give insight into the few differences inherent in these children because of lack of sight. Covered here are: responsibilities of the teacher in the blind child's adjustment; activities appropriate for blind children; equipment especially suitable for their use; the child's need for orientation to the classroom area; teacher-child relationships; ways of developing initiative and responsibility in the child; and problems of the child with some usable vision.

Available from Anthony J. Pelone, Bureau for Handicapped Children, State Education Dept., Univ. of the State of New York, Albany, N. Y.

See also 1404.

OCCUPATIONAL THERAPY

1428. Christrup, Helen H. (1712 S. Taylor St., Apt. #3, Arlington, Va.)

The new look in industrial therapy. Am. J. Occupational Ther. Sept.-Oct., 1957. 11:5:276-277, 291.

The three phases of industrial therapy--treatment, rehabilitation, and evaluation--are discussed in regard to the adaptations and changes in concepts which have occurred in the past two decades. Responsibilities of the therapist in industrial therapy are considered and further research is urged since many such findings would have wide application. Written reports to the physician are a necessity.

1429. Le Vesconte, Helen P. (Univ. of Toronto, Toronto, Canada)

Improving your work power. Canad. J. Occupational Ther. Sept., 1957. 24:3:81-88.

OCCUPATIONAL THERAPY (continued)

Presents a chronological account of the development of terminology in occupational therapy, with reference to writings prior to 1915 omitted.

The validity of some commonly used terms is questioned. Dr. Sidney Licht's explanations of four terms selected to describe the objectives of occupational therapy are given to illustrate that explicit words can be found to convey accurate meaning in this field of treatment.

OLD AGE--NEW YORK

1430. New York. State Joint Legislative Committee on Problems of the Aging Brightening the senior years; 1957 report of the.... Albany, The Committee, 1957. 139 p. illus.

Presents views of some of the foremost experts in health, social work, education, business, and employment on the effectiveness of State-local-citizen cooperation in behalf of the "senior citizen." This 1957 annual report brings up-to-date information on the development of comprehensive programs which have been achieved under the legislation originally initiated by the Committee. Governmental services necessary for the achievement of programs to meet unfilled needs of older persons in the community are recommended.

Copies of the report are limited but available, until the supply is exhausted, from Thomas C. Desmond, Chairman, N. Y. State Joint Legislative Committee on Problems of the Aging, 94 Broadway, Newburgh, New York.

OLD AGE--EMPLOYMENT

1431. Clark, F. Le Gros

Physical problems in the employment of aging men. Internatl. Labour Rev. Oct., 1957. 76:4:367-383.

The author, a member of the Nuffield Foundation (Great Britain) research project on aging within industry, discusses the problems of workers who wish to continue in their habitual employment or find alternative work after normal retirement age. British statistics are used as the framework within which a study is made of various occupations in which males are engaged. Incidence of chronic and disabling illness in man past the age of 55, alternative occupations open to the aging, measures for prolonging the working life, and suggested research in employment of the aging are discussed.

OLD AGE--PROGRAMS

See 1369.

OLD AGE--SPEECH CORRECTION

1432. Jones, Morris Val (Ill. State Normal Univ., Normal, Ill.)

Speech problems of older adults. Newsletter, Gerontological Soc. Sept., 1957. 4:3:5, 8.

Speech problems of the older adult are due to a variety of causes; some are caused by organically based speech defects persevering from childhood, perceptive hearing loss (presbycusia), misuse of the vocal mechanism, laryngectomy, and cerebral vascular accidents (stroke). This article deals mainly with problems of the stroke patient, prognosis for recovery of speech, and attitudes of the family.

PARALYSIS AGITANS--PSYCHOLOGICAL TESTS

1433. Machover, Solomon (Kings Co. Hosp. Center, 451 Clarkson Ave., Brooklyn 3, N.Y.)

Rorschach study on the nature and origin of common factors in the personalities of parkinsonians. Psychosomatic Med. July-Aug., 1957. 19: 4:332-338. Reprint.

A report of a study designed to evaluate Rorschach protocols of 30 parkinson patients with special reference to the "parkinson personality" described in the literature as assertive, ambitious, independent, and maturely, morally, and adaptively goal-directed. There was no evidence, in this study, of a consistent personality picture as described; rather the data pointed more to cognitive interference, dependence, instability, inertia, and passivity. Possible effects of increased duration of the disease need to be distinguished as regards the specific effects of parkinsonism and the general effect in the direction of greater homogeneity, construction, and impoverishment which may be characteristic of all restrictive chronic disease.

PARAPLEGIA--MEDICAL TREATMENT

1434. Arieff, Alex J. (670 N. Michigan Ave., Chicago 11, Ill.)

Inefficacy of Flexin therapy for spasticity due to spinal cord injuries, by Alex J. Arieff, Stanley W. Pyzik, and John R. Finkle. Ill. Med. J. Oct., 1957. 112:4:169-170.

A review of research on the value of zoxazolamine (Flexin) in the treatment of spasticity due to spinal cord injuries and in children with cerebral palsy. Recent results with Flexin in spasticity were presented at the Fifth Annual Paraplegia Conference held at Hines VA Hospital; clinically the drug was found to be of no value in neurologic spasticity due to spinal cord disease or injury. Numerous side effects of the drug are reported.

See also 1476.

PARENT EDUCATION

1435. Rutherford, Margery

When first you learn about your child. Crippled Child. Oct., 1957. 35:3:6-7.

The mother of a baby born a cripple three years ago gives new hope to parents in describing ways in which they can aid their children to attain emotional and mental health despite disability. The author's son, through treatment which included a series of casts and braces, a major operation, and corrective shoes, is now walking.

See also 1413.

PARTIALLY SIGHTED--EQUIPMENT

See 1487.

PARTIALLY SIGHTED--SPECIAL EDUCATION

1436. Education of the partially seeing child (a panel discussion, Natl. Soc. for the Prevention of Blindness annual conference, 1957). Sight-Saving Rev. Fall, 1957. 27:3:168-175.

A panel discussion by the Head of the Bureau for Handicapped Children, State Education Department, New York, two sight conservation teachers, and 8 partially seeing children attending sight conservation classes in New York City high schools, throws interesting highlights on the administration of such facilities, the services rendered, and their worth to students, as reported by the student participants.

1437. Pelone, Anthony J. (N. Y. State Education Dept., Albany, N. Y.) Classroom methods and materials for the partially seeing. Sight-Saving Rev. Fall, 1957. 27:3:162-167.

Discusses how teachers of the partially seeing can aid the regular classroom teacher in understanding the needs of these children who are integrated with seeing children in public schools. Audio-visual aids available for use with the partially seeing and the adaptation of methods within various areas of learning are discussed. State and local resources should not be overlooked in the search for solutions to the educational problems presented by this group.

PARTIALLY SIGHTED--SPECIAL EDUCATION--NEW YORK

1438. New York. State Education Department

The adjustment of the partially seeing child in the regular classroom. Albany, The Dept., 1957. 20 p.

A booklet published by the State Education Department's Bureau for Handicapped Children to acquaint regular class teachers with the special needs of partially seeing children, the use of the Snellen Test, services which local boards of education are authorized to provide, ways in which the teacher can aid in the adjustment of partially seeing children to the regular class, and sources of information and assistance.

Available from Anthony J. Pelone, Bureau for Handicapped Children, State Education Dept., Univ. of the State of New York, Albany, N.Y.

PEDIATRICS

1439. Fischer, Carl C. (100 W. Coulter St., Philadelphia, Pa.)

The pediatrician and his changing world. J. Pediatrics. Nov., 1957. 51: 5:593-605.

A review of early pediatric history and the emphasis on various aspects of pediatric practice, seen in particular eras. Dr. Fischer then discusses in detail aspects of present-day pediatric practice other than disease--such as, accidents and their prevention, adoption, school health, care of the handicapped child, and juvenile delinquency. The pediatrician's role in these social problems is explained.

PEDIATRICS (continued)

1440. Ross Laboratories

Psychological implications of current pediatric practice; report of the twenty-fourth Ross Pediatric Research Conference (March 1-2, 1957). Columbus, Ohio, The Laboratories, c1957. 76 p.

The proceedings of a symposium in which representatives from the fields of general medical practice, nursing, obstetrics, pediatrics, preventive medicine, psychiatry, psychology, and social work participated to examine the psychological implications of the parent-infant-doctor relationship. The content and validity of pediatric advice given during prenatal and well-baby visits were discussed, as well as factors influencing maternal attitudes prenatally and during the first three months of the infant's life.

Available upon request from Ross Laboratories, Columbus 16, Ohio.

PEDIATRICS--PERSONNEL

1441. Boder, Elena (9422 Beverly Crest Dr., Beverly Hills, Calif.)

Utilizing a school for handicapped children in medical education.

Pediatrics. Oct., 1957. 20:4:719-722.

Describes a new teaching program in the curriculum of the University of Southern California School of Medicine which utilizes resources of one of the 5 elementary schools for handicapped children in the Los Angeles City School System. In this integrated program for training medical students in the diagnosis and treatment of handicapped children, students are afforded the opportunity to observe handicapped children engaged in normal cooperative and competitive activities in the educational setting. Students also learn of major community facilities available for handicapped children, can observe a wide variety of handicapping conditions, and become aware of the educational needs and problems of the handicapped child.

PHYSICAL EDUCATION

1442. Van Schoick, Joseph H. (U.S. Office of Veterans Admin., Washington 25, D.C.)

A decade of progress in corrective therapy. J. Assn. Phys. and Mental Rehab. Sept.-Oct., 1957. 11:5:154-158, 160.

Cites developments over the past ten years in corrective therapy, physical education adapted to medical treatment. More effective and widening areas of service in the total patient treatment regimen have resulted with increased interest in motivations, interpersonal relationships, maintenance therapy, and research studies. A review of some of the literature in the field is included and reference is made to the growing number of training opportunities for corrective therapists. Criteria for the qualitative evaluation of chief therapist positions are outlined. Volunteers are also being drawn into service in this field.

PHYSICAL EFFICIENCY

1443. Warren, M. D. (London County Council, London, England)

The use of the Pulheems system of medical classification in civilian practice. Brit. J. Indust. Med. July, 1956. 13:3:202-209. Reprint.

Briefly describes the Pulheems system of medical classification adopted for use in the Armed Services of Great Britain and Canada and the results of its use with 1,000 applicants for civilian employment. In this survey the strict military interpretation of the system has been used. Although the classification system provided too fine a screen for minor defects and too coarse a one for major defects of civilian employees, it was useful in the collection of statistical information about the incidence of defects discovered at pre-employment medical examinations. Includes a description of a modification of the system useful in statistical analysis of the results of routine medical examinations. For a latter article by the author on this subject, see Rehabilitation Literature, Oct., 1957. #1203.

PHYSICAL THERAPY--ADMINISTRATION

1444. Shindell, Sidney (Am. Joint Distribution Committee, 19 rue St. Dominique, Paris 7^e, France)

Do you need malpractice insurance? Phys. Therapy Rev. Oct., 1957. 37:10:655-657.

A brief discussion presenting some basic principles of law regarding malpractice, and how it can affect the physical therapist. Elements of a comprehensive professional liability insurance policy are discussed as a means of aiding the therapist to evaluate his need for such insurance. Due to a rise in malpractice suits against the medical profession and co-professional workers, the American Physical Therapy Association has proposed a program of malpractice insurance.

POLIOMYELITIS

1445. Kelleher, W. Howlett (Western Hospital, London, England)

Glossopharyngeal breathing; its value in respiratory muscle paralysis of poliomyelitis, by W. Howlett Kelleher and R. K. Parida. Brit. Med. J. Sept. 28, 1957. 504:740-743.

Describes the mechanism of an adapted form of breathing termed glossopharyngeal breathing by Dr. C. W. Dail and his associates at Rancho Los Amigos in California. The value of the technique to poliomyelitis patients who experience respiratory muscle defect in the post acute and chronic stages of the disease is discussed; case reports of 6 patients from Western Hospital, London, are presented with an analysis of each. Duration of paralysis does not appear to be a deterrent to learning glossopharyngeal breathing, but younger patients seem to learn the technique with less difficulty and in a shorter period of time than the older patient. Relatively few children learn glossopharyngeal breathing.

See also 1392.

POLIOMYELITIS--BIOGRAPHY

See 1488; 1489.

POLIOMYELITIS--MEDICAL TREATMENT

1446. Nickel, Vernon L. (Rancho Los Amigos Hosp., Hondo, Calif.)

Elective surgery on patients with respiratory paralysis, by Vernon L. Nickel (and others). J. Bone and Joint Surg. Oct., 1957. 39-A:5:989-1001.

Reconstructive surgery for severe peripheral involvement in poliomyelitic patients, especially of the upper extremities, can be carried out successfully with the application of specialized respiratory techniques. Severity of respiratory paralysis is, in their opinion, not a factor in determining the advisability of a surgical procedure, but merely indicates the degree to which respiratory aid will be needed. Methods of patient evaluation, examination of breathing ability and vital capacity, nursing care and training of personnel, and surgical management are discussed.

PRACTICAL NURSING

See 1490.

PSYCHIATRY

See 1491.

PSYCHOANALYSIS

See 1483.

PSYCHOLOGICAL TESTS

1447. Nadler, Eugene B. (Highland View Cuyahoga County Hosp., Harvard Rd., Cleveland 22, Ohio)

Prediction of the sheltered shop work performance of individuals with severe physical disability. Personnel and Guidance J. Oct., 1957. 36:2: 95-98.

A report of a study which attempted to determine the predictive validity of prorated estimates of the Wechsler Adult Intelligence Scale Verbal IQ, Performance IQ, and Bender-Gestalt scores concerning the sheltered shop performance of older severely handicapped persons. Psychological factors important in the vocational rehabilitation of the handicapped were also investigated. Methods and results of the study are described; substantial validities were shown for all tests employed in the study and all seemed to have about equal predictive power. For further information on this sheltered workshop research project being conducted at Highland View Hospital, see Rehabilitation Literature, Jan., 1957, #152, and May, 1957, #689.

PSYCHOLOGY

1448. Carpenter, William A.

Social psychology and the physically disabled. Voc. Guidance Quart. Autumn, 1957. 6:1:137-140.

Social psychological theories pertaining to the "physically normal" individual may be the key to adjustment of the disabled individual or group, the author believes. He presents three theories, explaining how they might be applied to a specific case of a handicapped individual. The counselor's role in applying the theories in the case of an amputee who was rejected by his family and neighbors is considered.

PSYCHOLOGY (continued)

1449. Doll, Edgar A. (Chuckanut Drive, Box 143, Bellingham, Wash.)
The four IQ's. Exceptional Children. Oct., 1957. 24:2:56-57, 66.
An abstract (prepared by T. H. W. Martin, Inspector of Special Education, Toronto, Canada) of an address delivered by Dr. Doll at the Southwestern Regional Conference of the International Council for Exceptional Children, expressing his philosophy on the measure of intelligence and the factors which operate in the individual's achievement. He warns against glibly comparing achievement and intelligence quotient since the individual progress of the child depends upon a great variety of factors, often hard to identify and still more difficult to influence.
1450. Jensen, Louis (V.A. Hospital, Hines, Ill.)
The role of interpersonal relations in rehabilitation. Am. Arch. Rehab. Ther. Sept., 1957. 5:3:69-80.
Qualities of interpersonal relationships, goals sought, channels of communication, personality variations, setting of relationships, origin of interpersonal relations patterns, and observations on their relation to the rehabilitation process are considered, as well as types of individual response to disability. Not only are interpersonal relations between patient and rehabilitation personnel important but relations between members of the rehabilitation team influence the progress of patients.
1451. Shontz, Franklin C. (Highland View Cuyahoga Co. Hosp., Harvard Rd., Cleveland 22, Ohio)
Concepts of motivation in physical medicine. Arch. Phys. Med. and Rehab. Oct., 1957. 38:10:635-639. Reprint.
The author believes that the concept of motivation as a unitary force must be abandoned; in his opinion motivation should be viewed as a patterning of factors or dimensions which may be separately evaluated but actually operate in highly complex relationships. He discusses five factors which he considered minimum and which must be considered for an adequate description of an individual patient's motivational state. These factors are not believed sufficient to explain and describe all that is customarily included under the broad term of "motivation" but are necessary in making a prediction of rehabilitation success. Seven brief case histories are analyzed to illustrate the application of these factors to rehabilitation predictions.

PUBLIC ASSISTANCE--CALIFORNIA

See 1478.

PUBLIC HEALTH NURSING

1452. National League for Nursing (2 Park Ave., New York 16, N. Y.)
Hospitals and public health nursing services plan better patient care; report of national conference sponsored by Department of Public Health Nursing and Department of Hospital Nursing of the....Chicago, May 11-12, 1956. New York, The League, 1957. 39 p. \$1.00.

PUBLIC HEALTH NURSING (continued)

A summary report of the Conference, the main theme of which was the encouragement of communitywide action to plan for continuous care of the sick as they move from the hospital or clinic to the home. Part I deals with the planning necessary between nursing services in the hospital and in public health agencies for care to be given patients. Part II considers the broader subject of community planning to assure such care for all patients. Speeches included in the booklet are: Toward better patient care, George A. Silver. -Continuity of patient care through an interagency referral system, Doris Schwartz. -Communication, Bess Sondel. Additional material covers suggested steps for organizing a conference and a list of suggested references.

RECREATION--EQUIPMENT

1453. Logan, J. A. (St. Louis Soc. for Crippled Children, 4370 Olive St., St. Louis 8, Mo.)

There is more to toys than meets the eye; as seen by the physical therapist. Crippled Child. Oct., 1957. 35:3:15-18, 26-27.

A report of a toy study conducted by the St. Louis Society for Crippled Children in cooperation with the American Toy Institute to determine the value of toys in carrying out treatment and training techniques in the rehabilitation center and nursery school. Criteria for toys to be used in physical therapy are discussed. The value of specific toys, as demonstrated in the study, is mentioned.

REHABILITATION

1454. Adams, Donald R. (VA Hospital, Muskogee, Okla.)

Accomplishing the ultimate job objective; the importance of meticulous and efficient rehabilitative administration. South. Med. J. Apr., 1957. 50:4:478-481. Reprint.

Organized planning from the start of rehabilitation must take into account the patient, his anticipated future capacity, his family, social and environmental aspects of the case, and selection of a job objective suited to the handicap. A case history illustrates the relationship of the patient and his family to the problems of planning. Training in activities of daily living should be emphasized, as well as the need to recognize when maximal benefit has been reached. Training for a job should take into account the patient's former experiences! Discussion of the article by Dr. Edward M. Krusen, Jr. and Dr. W. L. Nolden is abstracted.

1455. Nickel, Vernon L. (Rancho Los Amigos Hosp., Hondo, Calif.)

The treatment of patients with severe paralysis. Postgrad. Med. June, 1957. 21:6:581-590. Reprint.

Various techniques and apparatus available for the prevention and correction of deformity and for the early restoration of function are described. Management of the patient and his family is considered both from the physical and psychological viewpoint. Motivation must be present in the patient and accompanied by a realization of the tangible goals which are possible. 23 illustrations.

REHABILITATION (continued)

1456. Social Work. Oct., 1957. 2:4.

Partial contents: Rehabilitation; a new specialization?, Arthur Duning, p. 3-9. -Social work in the process of rehabilitation, Ruth D. Abrams and Bess S. Dana, p. 10-15. -Understanding the emotional aspects of disability, John A. P. Millet, p. 16-21. -The significance of work inhibition for rehabilitation, H. A. Robinson and Jacob E. Finesinger, p. 22-31. -Casework in rehabilitation, James Breedlove, p. 32-36..

Several papers regarding the contribution of social work to total rehabilitation programs. The need to adapt social work curricula and to recognize the responsibilities involved in agency work with the handicapped and his family are stressed. Psychosocial aspects of rehabilitation are the basis for these articles.

This issue is available from National Association of Social Workers, 95 Madison Ave., New York 16, N. Y., at \$1.75 a copy.

1457. Yamshon, Leonard J. (224 N. Serrano Ave., Los Angeles 4, Calif.)

Industrial injury; the practical need for evaluation of capacity. J. Am. Med. Assn. Oct. 26, 1957. 165:8:934-938.

Although there are many highly specialized centers for the severely disabled, and many resources for the treatment of minor injuries, comparatively few are available for the complete physical treatment necessary for people with moderately severe injuries who anticipate returning to their previous occupation or a modification of their normal employment. Dr. Yamshon believes that present facilities often fail to recondition properly, through failure to simulate actual working conditions. He offers a possible type of program which would serve to reduce disability factors in some cases and at the same time give a clearer picture of true permanent disability factors. Such a program would serve as a protection to all parties concerned.

See also 1480.

REHABILITATION--PENNSYLVANIA

1458. Pennsylvania Health Council

Proceedings of the First Pennsylvania Conference on Handicapped Children, March 8-9, 1957... sponsored by the...in cooperation with the Alfred I. duPont Institute of the Nemours Foundation. Harrisburg, Pa., The Council, 1957. 85 p.

Concern over the duplication of services to handicapped children by various agencies prompted the Program Committee to select the theme of "Coordination" for this Conference. A summary statement of the proceedings was prepared by Dr. Samuel M. Wishik, covering 11 reasons why coordination is essential for improvement of services to handicapped children in Pennsylvania. Recommendations of the Pennsylvania Health Council, by its member agencies, and by professional groups point out the necessary changes for improving services and legislation to implement them. Dr. A. R. Shands, Jr., Medical Director of the

REHABILITATION--PENNSYLVANIA (continued)

Nemours Foundation, discussed the work of the Foundation and its conference on the handicapped, as well as work for the handicapped in Pennsylvania. Reports from workshops on education, social and family guidance, vocational problems of handicapped children, and recreation are included.

Available from Pennsylvania Health Council, 303 N. 2nd St., Harrisburg, Pa.

REHABILITATION--EQUIPMENT

See 1363; 1415.

REHABILITATION--PROGRAMS

See 1492.

REHABILITATION--STUDY UNITS AND COURSES

See 1468.

REHABILITATION CENTERS

See 1415.

REHABILITATION CENTERS--ILLINOIS

1459. Nusbaum, Carl (1409 S. California Ave., Chicago, Ill.)

Rest Haven. Public Aid in Ill. Sept., 1957. 24:9:10-12.

Reprinted from: Jewish Federation Rev. Dec., 1956.

A description of services available for rehabilitation of the disabled long-term ill and convalescent at Rest Haven Rehabilitation Hospital which is affiliated with the Jewish Federation of Chicago. Because this special hospital is able to work with patients for a much longer time than the general hospital and because the "team" approach is used in its program, Rest Haven can point with pride to its accomplishments in this field.

RHEUMATIC FEVER--MEDICAL TREATMENT--GREAT BRITAIN

1460. Illingworth, R. S. (Univ. of Sheffield, Sheffield, England)

Acute rheumatic fever in children; a comparison of six forms of treatment in 200 cases, by R. S. Illingworth (and others). Lancet.

Oct. 5, 1957. 273:6997-653-659.

In same issue: Cortisone treatment of rheumatic fever; relationship of weight to the speed of fall of erythrocyte-sedimentation rate, by R. S. Illingworth (and others). p. 659-660.

An analysis of the total experience during the past nine years in the treatment of rheumatic fever patients at Children's Hospital, Sheffield, England. Six methods of treatment were tested and results appeared to substantiate that cortisone is superior to salicylates in treating rheumatic fever. Cortisone combined with salicylates, especially in high dosage, is superior to cortisone alone. Because of the dangers of such treatment, however, it is recommended that treatment in the hospital under expert and continuous supervision, with full laboratory facilities available, is necessary.

RHEUMATIC FEVER--MEDICAL TREATMENT--GREAT BRITAIN (continued)

The second article reports comparison of weight in relation to age with response to treatment with cortisone, with or without salicylates. The rate of fall of the E. S. R. in 18 overweight children receiving cortisone was significantly slower than that in 30 underweight children; no corresponding significance was found in the rate of fall in 75 children receiving salicylates alone. It is believed by the authors that the results suggest salicylates act in a different manner from cortisone and provide a reason for combining cortisone and salicylates in treatment.

RUBELLA

1461. Greenberg, Morris (N. Y. City Dept. of Health, 125 Worth St., New York 13, N. Y.)

Frequency of defects in infants whose mothers had rubella during pregnancy, by Morris Greenberg, Ottavio Pellitteri, and Jerome Barton. J. Am. Med. Assn. Oct. 12, 1957. 165:6:675-678. Reprint.

In same issue: Rubella and pregnancy (an editorial), p. 688.

A report of a study of the infants of mothers who had rubella, as diagnosed by a physician, during pregnancy. From results obtained from actual examination of the infants and other reported prospective studies, the authors conclude that incidence rates reported by earlier workers are fantastically high and inaccurate. Recommendation of therapeutic abortion in such cases is not, in their opinion, medically justified. Physicians are warned against giving unsound medical advice to pregnant patients who contract rubella, implying that the risks are higher than these results would indicate. Exposure of young girls to rubella is recommended as a sound public health measure.

The editorial on p. 688 points out the fallacies of the methods of earlier studies on pregnancy and the effect of rubella in the mother on the unborn child. Requirements for setting up prospective studies are outlined.

SCOLIOSIS

1462. Irwin, C. Edwin (340 Boulevard, N.E., Atlanta 12, Ga.)

Experiences with the use of the Milwaukee frame in the treatment of paralytic scoliosis, by C. Edwin Irwin and James B. Wray. J. Bone and Joint Surg. Oct., 1957. 39-A:5:1020-1026.

Presents observations on 117 patients with paralytic scoliosis, treated at Georgia Warm Springs Foundation by means of the Milwaukee frame. A description of the brace is included, with information given also on selection of patients, the treatment program, and its results. The value of the Milwaukee frame lies in the fact that it permits the surgeon to apply traction and lateral-pressure corrective forces to the scoliosis with a minimum of effect upon respiratory exchange. It has been found successful in halting curve progression in 81 per cent of 42 cases available for evaluation in which surgery was not deemed necessary at the outset of treatment, and has been very effective as a holding and correcting apparatus for thoracic curves following fusion. It is not recommended, however, as an adequate replacement for fusion in the management of the severely degenerating curve.

SEGREGATION AND NONSEGREGATION

1463. Christman, Mary Rehr.

Integration or segregation in rehabilitation of the blind; which shall it be? Bul., Am. Rehab. Committee. Jan., 1957. 5:4:(1-4).

An historical review of the development of programs for the blind, illustrating why segregation is more prevalent in this field than in other areas of handicapped people. The author then cites her reasons for believing that rehabilitation programs for all types of handicaps, blindness included, can be integrated. From a dollar and cents point of view, integrated programs would be sensible, considering the dearth of rehabilitation personnel. Arguments for segregation of services for the blind are considered realistically.

1464. Tucker, Charlotte D.

Teen-agers can help. Crippled Child. Oct., 1957. 35:3:8-9, 19-20.

Advice to teen-agers on how they can make life more pleasant for their handicapped classmates. Describes how the teacher can brief the non-handicapped on the psychological aspects of disability and promote better understanding and acceptance of the disabled.

See also 1426; 1438; 1470.

SHELTERED WORKSHOPS

See 1415.

SHELTERED WORKSHOPS--OHIO

1465. Quinn, William A.

Pre-placement area: woodworking shop. Am. Arch. Rehab. Therapy. Sept., 1957. 5:3:87-90.

Reprinted with a few additions from: An investigation into the vocational potentials of hospitalized patients with chronic disabilities; second semi-annual progress report, Highland View Cuyahoga County Hospital, Cleveland. 1957. p. B-(1-6).

The author, manual arts instructor in a sheltered workshop research project at Highland View Hospital, Cleveland, manages the woodworking shop, one of three training areas within the project. It was established for clients who might benefit from learning new skills or relearning old ones. Administration as it deals with hours worked, pay received by clients, types of jobs performed, categories of clients served, and plans for expansion is discussed.

SOCIAL SERVICE

See 1456.

SOCIAL SERVICE--FINANCE

1466. National Publicity Council for Health and Welfare Services (257 Fourth Ave., New York 10, N. Y.)

So, you're going to raise funds, by David M. Church. New York, The Council, c1957. 56 p.

SOCIAL SERVICE--FINANCE (continued)

Both the professional and volunteer worker will profit from this pamphlet explaining the fundamental factors essential to fund raising and basic procedures capable of adaptation to large-scale or small fund-raising efforts. The author, Executive Director of the American Association of Fund-Raising Counsel, Inc., has had long and varied experience in fund-raising campaigns for colleges, hospitals, social welfare organizations and such national campaigns as the U.S.O and National War Fund. Details of organizing the campaign, recruiting volunteer workers, planning publicity and public relations, building prospect lists, setting up time schedules, the solicitation of capital funds, organization of the annual campaign, and ways of seeking foundation grants are all discussed briefly. A short list of books helpful to fund-raisers is included. This is the latest in a series of "How-to-Do-It" booklets published by the National Publicity Council which serves as a clearing house for ideas and counsels public service organizations.

SOCIAL SERVICE--GROUP WORK

1467. Armstrong, Robert M. (Erie Neighborhood House, 1347 W. Erie St., Chicago, Ill.)

Group work with cerebral palsied adults. Cerebral Palsy Rev.
July-Aug., 1957. 18:4:20-21, 23.

A report of three years' experience in working with cerebral palsied adult groups in a program provided at Erie Neighborhood House, Chicago, with the cooperation of United Cerebral Palsy. Problems faced by professional social workers in organizing a program primarily planned to meet the social needs of semi-dependent cerebral palsied adults are discussed, as well as the reactions of individual group members to the program. While the emphasis of the group work approach is not on therapy per se, the program has many therapeutic benefits.

SOCIAL SERVICE--STUDY UNITS AND COURSES

1468. California. University. School of Social Welfare

Report of Institute: Supervising for rehabilitation, June, 1957. Berkeley, The University, 1957. 80 p. Mimeo.

The proceedings of a workshop planned to increase the understanding of caseworker supervisors regarding their role in rehabilitation services and to point out responsibilities and opportunities for more active cooperation between social workers and rehabilitation agencies. Contents include: Report of Coordinator. -Supervising for rehabilitation, Andrew Marrin. - Meaning of rehabilitation in public welfare, Arthur W. Potts. -Illness as a vocational problem; the ecological aspects of illness evaluatory phase, Seymour Kolko. -Getting to know common disabilities; their vocational implications, Arthur Z. Cerf. -Communicating with physicians, Charles R. Gardipee. -Guides to referral. -The vocational assessment process, Ben B. Beales. -The supervisor's role in rehabilitation, Herbert H. Aptekar.

Also includes a report of case discussions and an evaluation of the Institute.

Available from Miss Elizabeth Hunter, Extension Representative, School of Social Welfare, University of California, Berkeley 4, Calif.

SOCIAL SERVICE (MEDICAL)

1469. McGrath, Jane K. (Kennedy Memorial Hosp., Brighton, Mass.)

The role of the medical social worker on the rehabilitation team.

Am. Arch. Rehab. Ther. Sept., 1957. 5:3:95-97.

In helping the patient to minimize his social, emotional, and environmental problems so that he may be better able to follow medical recommendations in the rehabilitation program, the medical social worker deals not only with the patient, but also with members of the patient's family and in close cooperation with other members of the rehabilitation team. The author is a medical social worker in a rehabilitation hospital for children.

SPECIAL EDUCATION

1470. Stroh, Ruth

The crippled child; a classroom asset. Crippled Child. Oct., 1957. 35:3:10-11, 23.

Discusses ways in which the public school teacher in the regular classroom can influence the acceptance or rejection of the crippled child in the classroom, how she can foster independence and self-respect in the handicapped child, and the gains afforded nonhandicapped children by day-to-day contact with handicapped children in the classroom situation.

See also 1441; 1464.

SPECIAL EDUCATION--NEW YORK

See 1405; 1427; 1438.

SPECIAL EDUCATION--PERSONNEL

1471. U. S. Office of Education

Special education personnel in State departments of education; a report based on findings from the study "Qualification and preparation of teachers of exceptional children," prepared by Romaine P. Mackie, Walter E. Snyder, (and others). Washington, D.C., Gov't. Print. Off., 1957. 49 p. illus., tabs., graphs. (Bul. 1956, no. 6)

Another of the more detailed reports based on the broad study "Qualification and preparation of teachers of exceptional children," the nationwide survey study conducted by the U.S. Office of Education. This particular publication gives findings regarding the professional competence of directors and specialists in State departments of education who are responsible for the education of exceptional children. Responsibilities of such personnel, and the knowledge necessary for successfully meeting them, are described. Findings are based on information submitted by directors and specialists themselves, by teachers, and by a committee of experts in the field. Methods of the study, statistical procedures, and results are described briefly.

Available from U.S. Superintendent of Documents, Washington 25, D.C., at 30¢ a copy.

SPECIAL EDUCATION--PROGRAMS

1472. Kershaw, John D. (Medical Officer of Health, Colchester, England)
Changing attitudes to the handicapped child. Public Health. May, 1957.
71:2:57-63. Reprint.

A discussion of the current trends of the past 15 years in the care and education of the handicapped child. Four basic axioms in the evaluation or re-evaluation of work for the handicapped are given and the provision of education for this group is considered. Special services or adaptations needed for the blind, partially sighted, the deaf and partially hearing, the educationally subnormal, the epileptic, and the physically handicapped child are mentioned briefly. The article reflects the author's British background in the subject.

SPECIAL EDUCATION--STUDY UNITS AND COURSES

1473. Kirk, Samuel A. (Institute for Research on Exceptional Children, Univ. of Illinois, Urbana, Ill.)
A doctor's degree program in special education. Exceptional Children. Oct., 1957. 24:2:50-52, 55.

The author, an authority in the field of special education, discussed standards for admission to an advanced program for the doctor's degree in special education. Standards formulated at the time such a program was first offered at the University of Illinois are the basis of the discussion.

SPEECH CORRECTION

See 1493.

TORTICOLLIS

1474. Lidge, Ralph T. (4833 W. Peterson Ave., Chicago 30, Ill.)
Congenital muscular torticollis; etiology and pathology, by Ralph T. Lidge, Robert C. Bechtol, and Claude N. Lambert. J. Bone and Joint Surg. Oct., 1957. 39-A:5:1165-1182.

A review of the important literature on congenital muscular torticollis, covering historical background of the deformity, the evolutionary development of the sternocleidomastoideus muscle, embryology of the trapezius and sternocleidomastoideus in the human, embryology of the nerve supply, blood supply to the muscle, etiology and pathology of the condition. Includes a bibliography of 87 references.

ULTRASONICS

1475. Norman, L. F.

Ultrasonics in the treatment of osteoarthritis, fibrositis and neuritis; an assessment of 1,323 cases. Brit. J. Phys. Med. Oct., 1957. 20:10: 217-224.

A report of a physiotherapist trained in the techniques of ultrasonic therapy in Germany on 1,323 cases treated, with few exceptions, solely by ultrasonics and involving over 13,000 treatments given under medical diagnosis and prescription during the past five years. Majority of the osteoarthritic cases treated had received orthodox medical and physical

ULTRASONICS (continued)

therapy treatment and had been classified as chronic. Apparatus and techniques employed are described, as well as results in this series and contraindications for use of ultrasonic therapy. Other research by the writer suggest the usefulness of ultrasonic therapy in sinusitis and sebaceous cysts..

UROLOGY

1476. Ross, J. Cosbie (Liverpool Regional Paraplegic Centre, Southport, England)

Recent developments in the treatment of the paraplegic bladder, by J. Cosbie Ross, N. O. K. Gibbon, and M. Damanski. Lancet. Sept. 14, 1957, 273:6994:520-524.

Treatment methods in common use at the Liverpool Regional Paraplegic Centre, Southport, for the management of the paraplegic bladder are described in detail. It is emphasized that paraplegic patients admitted immediately or at an early stage to a special center progress more satisfactorily and have fewer complications than patients treated in the general hospital. Use of the polythene-tube method of drainage of the bladder is, in the authors' opinion, an improvement over existing methods. Treatment is carried out under the direction of the neurosurgeon, orthopedist, plastic surgeon, and urologist and the urinary tract of the patient must be kept under regular observation, probably for the rest of the patient's life. An appendix to the article describes the technique of bladder drainage using polythene tubing.

VOCATIONAL EDUCATION

See 1428; 1465.

VOCATIONAL GUIDANCE

1477. Patterson, C. H. (Coll. of Education, Univ. of Illinois, Urbana, Ill.)

Theories of vocational choice and the emotionally disturbed client. Educ. and Psych. Measurement. Autumn, 1957. 17:3:377-390.

An examination of the psychoanalytic theory of vocational choice, the implications it provides for vocational counseling of the emotionally disturbed, and a review of other theories of vocational choice. The author believes that external influences are given too little consideration in most theories. While the average individual may adjust fairly well to an occupation into which he has been forced by chance or circumstances, vocational interest and adjustment of the emotionally disturbed appear to be more strongly influenced by emotional needs and less affected by reality. This article is from a chapter in a forthcoming book by Dr. Patterson titled "Counseling the Emotionally Disturbed," to be published by Harper & Bros.

See also 1398.

VOCATIONAL REHABILITATION--CALIFORNIA

1478. California. Bureau of Vocational Rehabilitation

The disabled welfare recipient; a rehabilitation challenge; a study of welfare cases closed as rehabilitated, unemployed or for other reasons during the 1956 fiscal year, prepared by I. J. Shain. Sacramento, The Bureau, 1957. 33 p. charts, tabs. Mimeo.

In this study based on individual case reports submitted for all welfare cases during the 1956 fiscal year, either as rehabilitated or not rehabilitated, the Bureau offers a summary of the findings, statement of conclusions, and much statistical data on the nature and origin of disability, source of referral, education, employment and marital status, principal reasons for closure and detailed information regarding type and costs of rehabilitation services given, type of agency giving training, and other aspects pertaining to rehabilitation services.

Available from California State Dept. of Education, Bureau of Vocational Rehabilitation, Sacramento 14, Calif.

VOCATIONAL REHABILITATION--NEW YORK

1479. Sanua, Victor D.

The vocational rehabilitation problems of disabled Puerto Ricans in New York City, by Victor D. Sanua (and others). New York, Institute of Phys. Med. and Rehabilitation, 1957. 69 p. tabs., charts. (Rehab. monograph no. 12)

A report of a 1-year study conducted under a grant from the U.S. Office of Vocational Rehabilitation, it discusses problems involved in the rehabilitation of disabled Puerto Rican migrants to the United States. A survey conducted at the Institute of Physical Medicine and Rehabilitation revealed specific difficulties with Puerto Rican patients in the areas of communication, attendance, and the establishment of vocational goals. Standard vocational and psychological tests were found hopelessly inadequate for planning. Data for the study were obtained from the Institute of Physical Medicine and Rehabilitation, from the New York State Division of Vocational Rehabilitation, and from major social and medical agencies having contact with the Division of Vocational Rehabilitation. Information was obtained on: the impact of American life on the Puerto Rican migrant; the background, problems, goals, and current status of the disabled in vocational areas; and factors directly pertinent to the rehabilitation process. Implications of the findings are discussed. Information contained here should be useful to counselors and other professional personnel working directly with Puerto Rican migrants since it provides a basis for formulating policies and practices applicable to their rehabilitation. Its usefulness in training programs for counselors is suggested.

Available from the Institute of Physical Medicine and Rehabilitation, 400 E. 34th St., New York 16, N.Y., at \$1.00 a copy.

See also 1371.

VOLUNTEER WORKERS

1480. Rose, Donald L. (Univ. of Kansas School of Med., Kansas City, Kansas)
New foods for thought. Clubwoman, Gen. Federation of Women's Clubs. Oct., 1957. 37:7:22-23.

Dr. Rose, whose work is concerned with rehabilitation and its medical aspects, points out advances in medicine within the past twenty years which have changed the health and welfare picture drastically, bringing both hope and serious problems by increasing the age span and, ironically, increasing the incidence of chronic illness and disability. These are matters which should concern each individual in the community; Dr. Rose stresses what can be done on a voluntary basis at the local level and challenges the individual to accept the responsibility.

1481. Women run this hospital for children. Modern Hosp. Oct., 1957. 89:4: 63-68.

Over 16,000 women volunteer workers engage in fund-raising activities, serve on numerous projects designed to make life easier for the nurses, and add pleasure to the hospitalization experience of patients at Children's Orthopedic Hospital, Seattle. This article is mainly photographs with brief text explaining the many duties taken over by guild and auxiliary workers.

See also 1388.

WALKING

1482. Leavitt, Lewis A. (V.A. Hospital, Houston, Texas)

Restorative activities in rehabilitation, by Lewis A. Leavitt and John J. Arena. Brit. J. Phys. Med. Oct., 1957. 20:10:224-232.

Briefly discusses the basic concepts of rehabilitation and the necessity to evaluate all needs of the patient and his family and economic environment. Major portion of the article is devoted to descriptions of adaptive and assistive devices useful in the treatment of hemiplegia and other chronic neurologic syndromes, mainly in the area of walking training.

New Books Reviewed

ASTHMA--BIOGRAPHY

1483. Picker, Lorraine

My inward journey; foreword by O. Spurgeon English; introduction by Lucy Freeman. Philadelphia, Westminister Pr., c1957. 187 p.

The story of a woman's search for the cause of her crippling asthmatic attacks and how she overcame, through the help of psychoanalysis, the inner conflicts with aggravated her physical illness. Her struggles to master the emotional upheavals which at times caused her to take refuge in illness were often painful and treatment was tedious but she emerged victorious when she could face her problems realistically. The book is a new departure for literature in the mental health field; rational and restrained in style, it reveals fully the impact which the working of the mind has on one's physical health.

Available from Westminister Press, Witherspoon Bldg., Philadelphia 7, Pa., at \$3.00 a copy.

EDUCATION

1484. French, Will

Behavioral goals of general education in high school, by Will French (and associates). New York, Russell Sage Foundation, 1957. 247 p. tabs., charts.

In 1951 three national educational agencies joined the Educational Testing Service in a survey of the behavioral outcomes of elementary education. After publication of "Elementary School Objectives," educators at the secondary school level proposed a similar study of objectives of general education in high schools. As printed here, the report represents the general consensus of a large group of persons active in and concerned with secondary education. A supplementary volume will be issued which will contain contributions of consultants and reviewers as they were submitted. The proposed lists of behavioral outcomes--organized under three maturity goals and four areas of behavioral competence included in the report--are offered as an aid to high schools in developing their most effective general education programs. Part I is a discussion of the philosophy of general education in the high school, its purpose, the nature of its desired outcomes, the principal specific behavioral outcomes, and its scope. Part II suggests ways in which the report could be utilized by administrators, teachers, and persons interested in and responsible for the development of curricula for high schools. Part III presents in detail the work of consultants and reviewers, the lists of behavioral outcomes which they developed, illustrations of various categories of behavior, and some suggested "developmental equivalents." A form for use in evaluating general education programs in terms of behavioral outcomes is included in addition to a selected list of references and a subject index.

Available from Russell Sage Foundation, 505 Park Ave., New York 22, N. Y., at \$4.00 a copy.

HANDICAPPED--FICTION

1485. Unwin, June C.

Little Sandy Sleighfoot, by June C. Unwin; illustrations by James Alan Unwin; lyrics by Philip M. Crane; music by Joseph E. Savarino. Mellott, Ind., Hopkins Syndicate, c1957. n.p. illus.

Sheet music of the song by the same title.

45 RPM record of the same name by Columbia Records (4-41025).

An appealing little Christmas story for young children of Sandy, the son of Santa's chief helper, and his feelings of inadequacy because of clumsiness caused by his unnaturally large feet. Theme of the story is that no one is so crippled, shy, clumsy, or ugly that he can't help other people. On Christman Eve Sandy, skiing downhill to the village to save the reindeers when fire broke out in the stable, becomes a hero through his unique ability to use his feet as skis.

Sheet music and phonograph record of the same title are available.

Price of the book is \$2.95; sheet music, 60¢. Available from Hopkins Syndicate, Inc., 520 N. Michigan Ave., Chicago 11, Ill.

NERVE INJURIES

1486. Woodhall, Barnes, ed.

Peripheral nerve regeneration; a follow-up study of 3,656 World War II injuries; ed. by Barnes Woodhall and Gilbert W. Beebe. Washington, D.C., Gov't Print. Off. (1957). 671 p. figs., tabs. (VA med. monograph)

A report of a clinical research program extending over 11 postwar years and based on a vast accumulation of records kept in medical installations of the Armed Forces, this follow-up study of peripheral nerve regeneration after battle-incurred injury provides answers to many basic problems of peripheral nerve surgery. The value of physical therapy during the period of regeneration has been proved; it is shown that the degree of functional recovery can be estimated with reasonable precision, to illustrate several of the basic concepts established by evidence. Chapters cover organization and conduct of the study, management of injuries, recovery of motor and sensory function, electrical evidence of regeneration, pain and related phenomena, autonomic recovery, functional recovery and occupational adjustment, results following peripheral nerve suture, neuropathological predictions of recovery, neurosurgical implications, and recovery following brachial plexus injury. Investigations were conducted as a collaborative effort under contracts with medical schools of Duke, Columbia, Northwestern, Pennsylvania, and California Universities, Massachusetts General Hospital, and the National Academy of Sciences. Chapters were contributed by many authors who are authorities in the field.

Distributed by U.S. Superintendent of Documents, Washington 25, D.C., at \$3.75 a copy, clothbound.

PARTIALLY SIGHTED--EQUIPMENT

1487. Industrial Home for the Blind, Brooklyn

IHB optical aids service; survey, first 500 cases, March, 1953 to December, 1955. Brooklyn, The Home, 1957. 47 p. illus., tabs.

In connection with the rehabilitation program of the Industrial Home for the Blind, Brooklyn, the Optical Aids program was integrated with the Medical Eye Care program to provide special visual service to a large group of its clients--the blind with residual vision. Service includes a careful refraction, magnification when possible and practicable, and provision of auxiliary aids when helpful, as well as preventive and restorative care analysis. This report describes procedures of the service and results in the first 500 cases served. Of the group 68 per cent obtained a useful increase in visual acuity through the use of optical aids, opening up opportunities for employment, recreation, and increased personal independence even though most of these persons are still classified as legally blind. Approximately 69 per cent of the lenses prescribed were those found in the trial cases of regular eye practitioners. The importance of the specialized optometric technique in low-vision examination is emphasized. The role of members of the professional team employed in the program is described.

Available from Industrial Home for the Blind, 57 Willoughby St., Brooklyn 1, N.Y.

POLIOMYELITIS--BIOGRAPHY

1488. Le Comte, Edward

The long road back; the story of my encounter with polio. Boston, Beacon Pr., 1957. 175 p.

On sabbatical leave from his position as associate professor of English at Columbia University, Edward Le Comte was stricken with polio while vacationing in France with his wife and young son. He traces his treatment through three hospitals--one in France and two in the United States--his personal reactions to the disease, and his return to a more normal life at home and to his work at the university. Mr. Le Comte, before his illness, had established a reputation as a scholarly writer; the introspective-ness, the quiet humor, and philosophy with which he takes illness in stride are in contrast to attitudes one sometimes senses in personal accounts of disability

Available from Beacon Press, 25 Beacon St., Boston 8, Mass., at \$3.95 a copy.

1489. Opie, June

Over my dead body. New York, E. P. Dutton & Co., 1957. 265 p.

The author, a young New Zealander eager to begin her study of speech therapy in England, arrived in London on a Saturday; by Monday she had been rushed off to St. Mary's Hospital suffering a particularly severe form of poliomyelitis which completely paralyzed her. This is an account of her life at the hospital for more than three years and her fight to bring her muscles back to life. Her determination and sense of humor made even this long convalescence seem fun; she rarely felt any pity for herself and each small advance gave her more courage and joy. The reader will find here a story that is hilarious and full of the wonder of living; somehow the term "handicapped" could never be applied to June Opie.

Available from E. P. Dutton & Co., 300 Fourth Ave., New York 10, N. Y., at \$3.50 a copy.

PRACTICAL NURSING

1490. Esau, Margaret C.

Practical nursing today; attitudes, knowledge, skills, by Margaret C. Esau (and others); ed. by Cordelia W. Kelly. New York, G. P. Putnam's Sons, c1957. 527 p. illus.

Five authors experienced in practical nursing education and in the direction of nursing care by practical nurses have collaborated to bring down-to-earth information on the professional aspects of practical nursing, fundamental scientific knowledge, human growth and development from birth to death, nursing care in acute and long-term illnesses, and basic nursing techniques. Part I, by Elizabeth C. Phillips, discusses current educational programs, licensure, organizations, job opportunities, ethics, and professional attitudes. Part II, by Margaret C. Esau, deals with the basic sciences and enables the nurse to understand structure and functioning of the body. Part III, by Eleanor A. Tourtillott, is concerned with family life from marriage to old age and explains the course of pregnancy and the growth and development of children from infancy

PRACTICAL NURSING (continued)

through adolescence, as well as the problems of the middle-aged and elderly family. Part IV, by Kathryn Goodman Frentzos, covers nursing care and treatment of common illnesses; and Part V, by Barbara R. Fallon, is devoted to fundamental principles of nursing. Additional material in the appendixes includes: laboratory-test chart, list of sources of educational materials, a glossary of unusual terms in nursing and medicine, and a subject index. In addition to being a most significant publication for the practical nurse and nursing instructor, it can be recommended as useful in parent instruction and in the training of aides and volunteer workers in rehabilitation programs.

Available from G. P. Putnam's Sons, 210 Madison Ave., New York, N. Y., at \$5.95 a copy.

PSYCHIATRY

1491. Kanner, Leo

Child psychiatry; 3d ed. Springfield, Ill., Charles C Thomas, Publ., c1957. 777 p. \$8.50.

In this third revision of a standard text for pediatricians and child psychologists, Dr. Kanner, Professor of Child Psychiatry and Director of Children's Psychiatric Services at Johns Hopkins University and Hospital, reflects the considerable advances made in the integration of psychiatric thinking and pediatric perspective. Practically oriented, it covers all the psychiatric problems of children as seen in medical practice and enables the physician in advising parents on a wholesome environment for the child. Of special interest are discussions of the psychological consequences of physical illness and handicap, problems of scholastic performance where there is a handicap, and behavior disorders associated with various physical illnesses, such as disorders of the brain, central nervous system, and epilepsy, among others. Emphasis is on clinical treatment and the importance of studying cause and meaning of behavior. Case history material is used extensively to illustrate the discussions.

REHABILITATION--PROGRAMS

1492. National Health Council

Ten million and one; neurological disability as a national problem; Arden House Conference, sponsored by the.... New York, Paul B. Hoeber, c1957. 102 p.

The Arden House conference, held December 5-7, 1955, at Harriman, N. Y., was attended by some 48 persons associated with interested national public and private agencies. Its cost was underwritten by United Cerebral Palsy Associations. The conference was called so that national authorities could discuss in broad terms the present status and future outlook of neurological disorders, such as cerebral palsy, epilepsy, muscular dystrophy, multiple sclerosis, Parkinson's disease, poliomyelitis, and cardiovascular disorders. Group discussions, summarized in the book, were on the broad principles determining program planning and procedures to be taken in providing necessary services to the more than ten million persons in the United States with neurological disabilities. Problems relating to personnel, research, public education and the need for greater

REHABILITATION--PROGRAMS (continued)

cooperation among all rehabilitation agencies and personnel were also considered. Appendixes contain a representative listing of the 300 neurological disorders and lists of persons who participated at the conference and of agencies concerned with neurological disorders.

Published by Paul B. Hoeber, Inc., Medical Book Dept. of Harper & Bros., 49 E. 33rd St., New York 16, N.Y., at \$3.50 a copy.

SPEECH CORRECTION

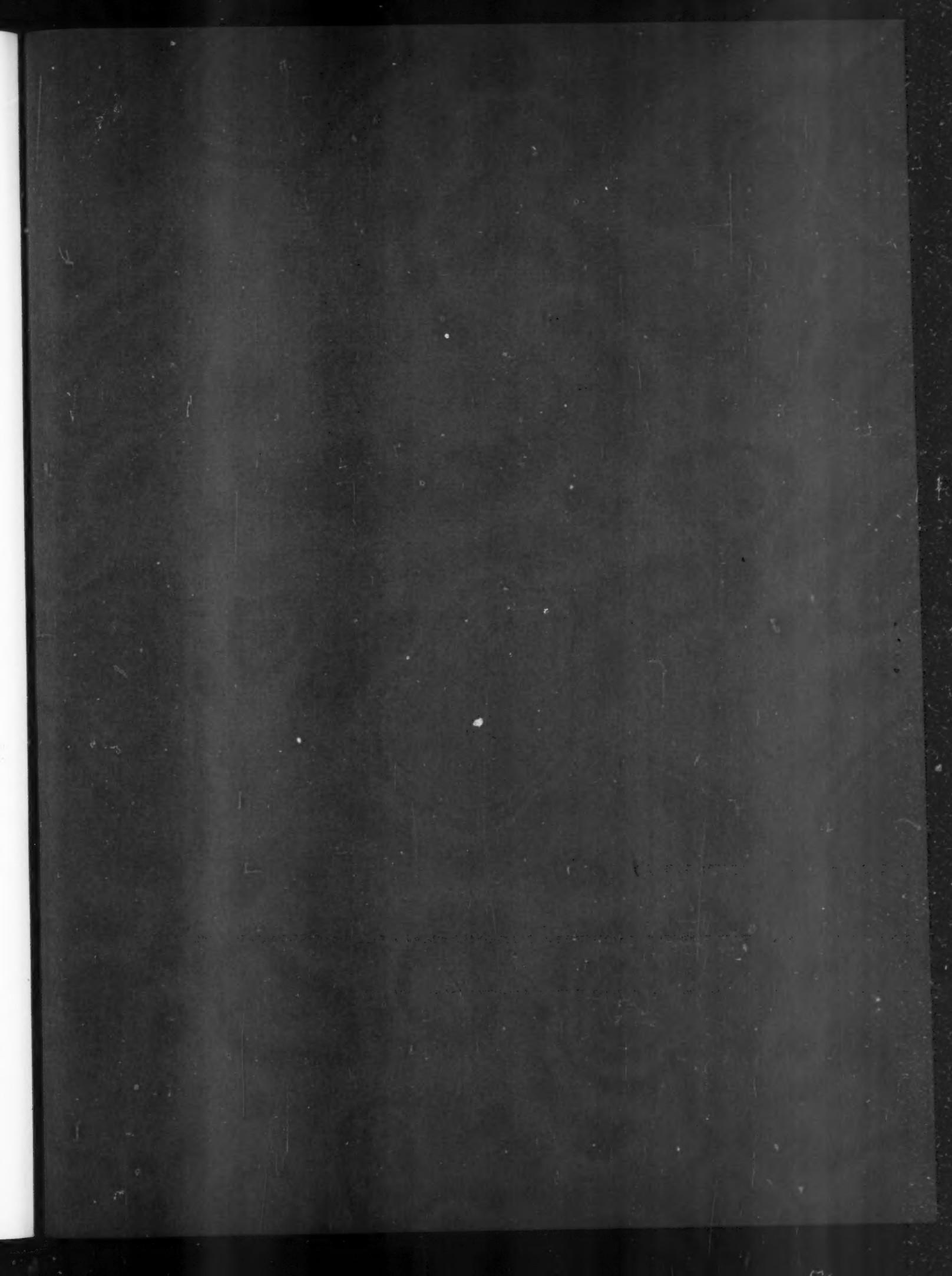
1493. Morley, Muriel E.

The development and disorders of speech in childhood. Edinburgh, E. & S. Livingstone, 1957. 440 p. figs., tabs.

In this practical handbook by a well-known speech therapist in England, the main developmental disorders of speech are considered under broad categories consistent with accepted neurological concepts and of proven value in treatment and prognosis. Based on clinical observations of a pediatrician, neurologist, psychologist, and speech therapist, the book represents a broad picture of the development and disorders of speech in childhood within the context of the local community. Findings on various types of speech disorder are given, as well as the treatment prescribed. Following an introductory chapter presenting the general picture and outlining conditions considered in later chapters, the remainder of the material covers: the pattern of speech development revealed in a detailed investigation of children's speech in 1,000 families in Newcastle-upon-Tyne, England; the delayed development of speech; defective articulation; stammering; speech disorders in twins; and lateral dominance and disorders of speech. Also includes findings of a detailed survey of the incidence and type of speech disorders in school age children in a local urban community.

The book was written to provide speech therapists, teachers, medical specialists and general practitioners with a more thorough understanding of the etiology and management of speech disorders in children, and of the educational and psychological aspects of management.

Distributed in the U.S. by Williams & Wilkins Co., Baltimore 2, Md., at \$9.00 a copy.





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